



Targeted interventions
to promote well-being and
reduce behavioural challenges
among ageing adults
with intellectual disability

EXECUTIVE SUMMARY | ETMI

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Title

Targeted interventions to promote well-being and address behavioural challenges among ageing adults with intellectual disability

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Intellectual disability (ID) affects approximately 1% of the population and, for some individuals, is associated with premature ageing and support needs that become increasingly complex with advancing age. Some ageing adults with ID present with comorbidities, communication difficulties, cognitive decline or neurocognitive disorders while others exhibit behavioural challenges whose frequency or expression may change over time. These behaviours, which occur more frequently than in the general population, may be associated with a range of underlying factors, including unmet needs, physical or mental health conditions, environmental or psychosocial factors. Given the diversity of factors that may affect the well-being and behaviour of ageing adults with ID, identifying interventions that adequately address their evolving needs remains a significant challenge for their care providers. The available evidence, however, remains limited creating uncertainty regarding the best practices and constraining the capacity to care for individuals with evolving needs and limiting the ability to deliver consistent, person-centred and responsive care.

CONTEXT

People with ID are living longer and often experience age-related changes earlier than the general population. This demographic shift is accompanied by increasingly complex support needs, arising from chronic health conditions, functional decline and, for some individuals, cognitive or behavioural changes. The interaction between ageing and ID adds complexity to care planning and delivery. As the needs of this population evolve over time, providers are not always adequately equipped to provide tailored support. Residential settings offering continuous assistance (RACs) are increasingly required to respond to these changing needs, yet available interventions are not always adapted to the realities of ageing adults with ID. This gap may create service-delivery challenges and, in some cases, lead to referrals to inappropriate care settings. In this context, the UETMISSS was mandated to identify targeted interventions to promote well-being and reduce challenging behaviours among ageing adults with ID, thereby supporting decision-making within the Direction des programmes pour la déficience intellectuelle, le trouble du spectre de l'autisme et la déficience physique (DITSADP).

OBJECTIVE

This ETMI aimed to answer the following question:

" Which interventions can improve well-being and, when necessary, reduce challenging behaviours among ageing adults with ID? "

The mandate was guided by the three following evaluation questions:

- Which interventions are effective in promoting well-being and, when necessary, reduce behavioural challenges?
- Are the identified interventions safe for service users and professionals?
- What professional and organizational aspects should be considered when implementing the identified interventions?

For further information, see the report at : https://www.ciuss-capitalenationale.gouv.qc.ca/sites/d8/files/docs/MissionUniversitaire/ETMISSS/Rapport-ETMI_Pistes-pers-vieillissantes_DI.pdf

METHODOLOGY

To address these evaluation questions, several data sources were used. A systematic review of the literature was conducted across three bibliographic databases (CINAHL, Embase and MEDLINE) and relevant websites, covering publications from January 1st, 2015, to June 9, 2025. Two professionals divided the tasks after ensuring a shared understanding of the selection and quality appraisal criteria. Relevant data were extracted using a structured grid. The evidence was then synthesized and analyzed considering the evaluation questions, leading to the formulation of key findings.

RESULTS

The literature search yielded 3,303 records, including 1,039 from bibliographic databases and 2,473 from web-based sources. Twelve publications were selected: eight primary studies, one rapid scoping review and three grey literature documents. Regarding methodological quality, four studies were assessed as high quality and five as moderate quality. Grey literature documents were judged to have moderate credibility. In the absence of an established level of evidence, the main findings were drawn from a synthesis and analysis of the overall results in relation to the evaluation questions.

A) Effectiveness of Interventions

- Individualized environmental interventions are associated with reductions in agitation, distress and reactive behaviours among ageing adults with ID (Cleary and Doody, 2017).
- Structured and predictable environments incorporating visual cues as well as consistent routines may help reducing stress and anxiety while improving spatial and temporal orientation (Araten-Bergman and Bigby, 2024; Watchman *et al.*, 2021).
- The evidence suggests that interventions and approaches such as reminiscence therapy (Crook *et al.*, 2016), music therapy (Staab et Dvorak, 2019), cognitive stimulation therapy (MacHale *et al.*, 2024), physical activity (Van Schijndel-Speet *et al.*, 2017) and Positive Behaviour Support (PBS) may improve well-being, quality of life, mood, engagement and social participation while also helping to reduce challenging behaviours (Tilley *et al.*, 2023).

B) Safety of Interventions

- The safety of interventions was not directly assessed in the included studies; however, several user-related safety considerations were reported.
- Adaptations to the physical environment and equipment, combined with appropriate supervision, gradual transitions and the preservation of familiar cues and routines, contribute to preventing risk situations and promoting the safety of ageing adults with ID.
- No information regarding staff safety was identified in the documents included.

C) Professional and organizational dimensions

The quality and consistency of interventions depend on five key enabling conditions: staff training, adequate staffing levels, interdisciplinary collaboration, effective communication and the individualization of interventions.

- Staff training and adequate staffing levels are key factors in ensuring the quality and consistency of interventions and the effectiveness of the support provided to service users (MacHale *et al.*, 2024; Webber *et al.*, 2016).
- Structured interdisciplinary collaboration improves continuity of care and enhances the relevance of interventions (Tilley *et al.*, 2023).
- Clear and tailored communication, both among care providers and with service users, supports understanding of instructions. Tools such as visual cues, simplified guidance and life stories can facilitate understanding and foster positive interactions. These strategies help meet individual needs and reduce distress, particularly during transitions (Araten-Bergman et Bigby, 2024).
- Individualized interventions tailored to individuals' abilities, preferences and life experiences are associated with improved engagement, mood and overall well-being among ageing adults with ID (Cleary et Doody, 2017; Watchman *et al.*, 2021).

KEY FINDINGS

The following key findings were formulated based on the convergence of data from both the scientific and the grey literature.

General findings :

- Various interventions intended to reduce challenging behaviours and improve the well-being of ageing adults with ID were identified.
- Some of these interventions were adapted from approaches originally developed for ageing adults without ID.
- The effectiveness of these interventions has been evaluated in a limited number of studies.
- The characteristics of the ageing adults with ID represented in the included literature were highly heterogeneous.

Question 1 : Which interventions are effective in promoting well-being and, when necessary, reduce behavioural challenges?

Several effective environmental, psychosocial and physical interventions were identified. However, the heterogeneity across both the interventions and the service users does not allow conclusions to be drawn as to which interventions are the most effective.

Question 2 : Are the identified interventions safe for service users and professionals?

The safety of interventions was not assessed in the selected studies; however, several safety-related considerations for service users were reported, including adaptations to the physical environment.

Question 3 : What professional and organizational aspects should be considered when implementing the identified interventions?

Key professional and organizational considerations for implementing the identified interventions include staff training, the establishment of multidisciplinary teams, the individualisation of interventions, effective communication and adequate staffing levels.

CONCLUSION

This ETMI suggest that certain interventions may promote the well-being of ageing adults with ID and help reduce challenging behaviours. However, their effectiveness cannot yet be established conclusively. These interventions include individualized psychosocial approaches, reminiscence therapy, music therapy, cognitive stimulation therapy, adapted physical activity and environmental adjustments. The findings also highlight the importance of conducting a functional clinical assessment of behaviours and implementing structured longitudinal follow-up to adapt interventions to evolving needs, particularly when neurocognitive disorders emerge.

The selection, adaptation and customization of interventions must be based on a functional clinical assessment, structured longitudinal follow-up and favorable organizational conditions, in a perspective of ongoing monitoring of changing needs.

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