Collaborative mental health care to support adults on the autism spectrum

Monday, 5th June 2017

“Working together. Working better.”

Supported by The Royal Australian College of General Practitioners, the Australian Psychological Society, the Australian College of Mental Health Nurses and The Royal Australian and New Zealand College of Psychiatrists
This webinar is presented by

Tonight’s panel

Dr Aline Smith
General Practitioner

A/Prof Amanda Richdale
Psychologist

Dr Anna Urbanowicz
Occupational Therapist

Prof Julian Trollor
Psychiatrist

Facilitator

Dr Lyn O’Grady
Psychologist
Ground Rules

To help ensure everyone has the opportunity to gain the most from the live webinar, we ask that all participants consider the following ground rules:

• **Be respectful of other participants and panellists.** Behave as you would in a face-to-face activity.

• You may interact with each other and the panel by using the **participant chat box.** As a courtesy to other participants and the panel, keep your comments on topic. Please note that if you post your technical issues in the participant chat box you may not be responded to.

• For help with your technical issues, click the **Technical Support FAQ tab** at the top of the webinar room. If you still require support, call the Redback Help Desk on 1800 291 863. If there is a significant issue affecting the overall delivery of the webinar, you will be alerted via an announcement.

• Your feedback is important. Please **complete the feedback survey** which will appear on your screen when the webinar finishes.
Learning Outcomes

Through an exploration of David’s story the webinar will provide participants with the opportunity to:

• Describe the role of different disciplines in providing support to adults on the autism spectrum

• Recognize the warning signs, prevalence and risks of mental illness for adults on the autism spectrum

• Identify tips, strategies and challenges in providing collaborative mental health care for adults on the autism spectrum.
General Practitioner perspective

What knowledge does a General Practitioner have?

- Full medical history
- Family history and background of psychosocial issues
- Existing rapport and understanding of David
General Practitioner perspective

Physical, mental, “behavioural” or combination?

- Behaviour change is a common reason for people with autism or intellectual disability to see a GP
- Often the behaviour can be an attempt by the person to communicate discomfort or distress due to illness, pain, environmental stresses and/or psychological problems (Davis and Mohr 2004)
- GP responsible for physical assessment
- Balance with over investigating physical symptoms
- GP responsible for mental health assessment.

Aline Smith
General Practitioner perspective

What do we know? People with Autism/ID

- May have existing comorbid physical issues
- The majority of people with autism have an intellectual disability (American Psychiatric Association, 1994)
- Higher prevalence of psychiatric conditions such as depression, schizophrenia and anxiety disorders than others in the population
- Due to cognitive and communication problems, they may have an atypical presentation and diagnosis may be difficult
- People with autism or ID have the same right to access mental health services
- On the other hand....
Cardinal Rules for a successful interaction with patients with ASD

- Be calm and not afraid or dismissive
- Speak slowly (not loudly)
- Wait for 10 seconds for person to speak or express
- {Use gestures or pictures if possible}
- Reinforce good behaviour or expressions
- Get assistance - involve a team approach (include carers, supports, others)
- Schedule review
- Several appointments (long) to get to the bottom of things
Psychologist perspective

Autism Spectrum Disorder

• Core difficulties:
  1. Social-communication
  2. Routines, repetitive behaviours, sensory sensitivities

• Co-morbid conditions:
  ✓ Anxiety, anxiety disorders/OCD
  ✓ Depression, mood disorders
  ✓ Executive function (EF) difficulties
  ✓ Insomnia/circadian sleep disorders
  ✓ Gastrointestinal issues
  ✓ Fine motor difficulties
  ✓ Poor adaptive behaviour
  ✓ Other mental health problems
  ✓ Intellectual disability
Psychologist perspective

Background

- Mother: Worrier, David’s life-long mainstay.
- Father: Reclusive
- Sister: Absent
- David:
  - No early intervention or supports – late diagnosis
  - History of social isolation, bullying
    * Somatic complaints
    * Probable anxiety
    * Sensory issues/routines
    * Anger issues
    * Qualified but under-employed
    * Socialises around socially acceptable interest
    * Still heavily reliant on mother
Psychologist perspective

Crisis precipitation

• David still has:
  ✓ Somatic / gastric complaints
  ✓ Anger
  ✓ Reliance on mother
  ✓ Socialisation around specific interest

• Mother hospitalised change:
  ➢ Transportation
  ➢ Meals
  ➢ Routines

Amanda Richdale
Psychologist perspective

Outcomes
• David:
  - Angry
  - Self-injuring
  - Poor sleep
  - Inadequate diet
  - Somatic complaints
  - Poor personal hygiene
  - Loss of social contacts
  - Unemployed

• In summary:
  - Isolation
  - Mental Health problems
  - Physical Health problems

Amanda Richdale
Psychologist perspective

The Psychologist

- Consider referrals for:
  - Medical evaluation / treatment
  - Psychiatric evaluation / medication
  - OT evaluation

- Key areas for assessment / intervention:
  - Mental health (Intolerance of uncertainty [IU])
  - Anger management (Emotion regulation [ER])
  - Sleep (relationship with mental health, IU, ER)
  - EF difficulties

- Sensory issues
- Adaptive behaviour
- Communication between parties involved
Occupational Therapist perspective

Occupational participation of autistic adults

• Education
• Employment
• Leisure
• Social participation
• Activities of daily living
• Instrumental activities of daily living

Anna Urbanowicz
Factors influencing occupational participation:

• ASD core features:
  – Social communication skills
  – Restricted & repetitive behaviours/interests/activities
  – Sensory sensitivities

• Comorbidities:
  – Physical & mental health
  – Intellectual disability

• Plus many others...
Occupational Therapist perspective

Factors contributing to anxiety in autistic individuals

Key things for OTs to consider
• Assessment:
  • Client centred goals (COPM, GAS)
  • Factors contributing to participation restrictions
  • Factors contributing to anxiety, particularly sensory differences
  • Involvement of support person/s

• Adaptations for autistic adults:
  • Clear communication (e.g. Unambiguous language, use of visuals/videos/demonstrations, check for understanding)
  • Sensory differences (e.g. Avoid fluorescent lighting, noisy environments)
Psychiatrist perspective

Mental Ill Health in ASD Adults

- Diversity of population
  - specific subgroups
- Core over-representation
  - anxiety disorders
  - affective disorders
  - psychotic disorders
  - other developmental disorders
Vulnerability to mental ill health

- Biological
- Psychological
- Social
- Environmental
- Past Experiences
- Lifestyle

**Risk Factors for Mental Illness**

Julian Trollor
Psychiatrist perspective

Barriers to effective treatment

- Interaction between services
- Communication difficulties
- Carer and disability professional's skills and training
- Lack of skilled and specialised services
- Health professional's skills and training
- The person's knowledge about health issues

Julian Trollor
Psychiatrist perspective

Key adaptations in assessment

- Preparation
- Communication
- Carers
- Developmental perspective
- Sensory aspects
- Physical health comorbidities
- Assessing behaviour

Julian Trollor
Psychiatrist perspective

Key management issues

- Comprehensive formulations
- Interdisciplinary practice
- Psychological therapies
- Responsible prescribing
Help guide tonight’s discussion

The following themes were identified from the questions you provided on registration:

1. Assessment / diagnosis
2. Collaboration: who & how?
3. Medication
4. Strategies to engage
5. Gender differences
6. Employment/work-place

A pop up will appear on your screen shortly listing the themes. Choose the one you’d most like the panel to discuss.
Q&A session
Thank you for your participation

- Please ensure you complete the exit survey before you log out (it will appear on your screen after the session closes)
- Certificates of Attendance for this webinar will be issued within two weeks
- Each participant will be sent a link to the online resources associated with this webinar within two weeks
- Our next webinar, Co-ordinating mental health care for people experiencing suicide bereavement, will be held on Thursday 17th August at 7.15pm – 8.30pm (AEST).

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Thank you for your contribution and participation

Good evening