Autism Spectrum Disorder and Children's Mental Health



Autism Special Interest Group Webinar Series

April 27, 2015

Welcome to the Autism Spectrum Disorder and Children's Mental Health webinar organized thru the Autism Special Interest Group (SIG).

Autism SIG provides mechanism for LEND and UCEDD centers that are part of the AUCD network to learn from and collaborate around issues and interests.

Speakers:

- Shannon Haworth, MA,
 - Senior Program Specialist, AUCD
- Dr. Cathy Pratt, BCBA-D
 - Director, Indiana Resource Center for Autism, Indiana Institute on Disability and Community, Indiana University
- Heidi Cloutier, MSW
 - University of New Hampshire Institute on Disability

- Reminders
 - Recorded and Archived
 - •Q & A
 - Survey



Shannon Haworth, MA Senior Program Specialist, AUCD

Autism Spectrum Disorder and Mental Health One Families Story

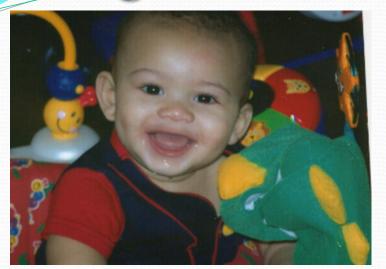


Shannon Haworth, MA Association of University Centers on Disabilities

Background

- Mother of a child with an Autism Spectrum Disorder
- Comorbid mental health issues
- Sharing our story
- Challenges
- Interventions that have worked
- What is needed for families

Logan











Logan

- Very hard to get a diagnosis for my child (knew something was wrong)
- Finally at 4 diagnosed with PDD-NOS by a developmental pediatrician
- At 6 it changed to Autistic Disorder (ADOS testing)
- Toughest challenges has been school, his mental health

Mental Health and Autism

1 in 5 kids have a mental health condition Most start before the age of 14

Over 70% of children with autism have at least 1 comorbid mental health issue

Children with Autism and Mental Health Disorders

Disorder	Prevalence
ADHD	28.10%
Social Anxiety Disorder	29.20%
Generalized Anxiety Disorder	13.40%
Panic Disorder	10.10%
Mood Disorder	10.70%
Major Depressive Disorder	.90%
Conduct Disorder	.50%
1 Mental Health Disorder	70.80%
2 or more	17.00%
3 or more	24.00%

Mental Health Challenges

- Noticed his mood changed rapidly
- Impulse control
- Afraid of my own child
- ADHD
- Decided on medication route...

Mental Health Crisis

- Manic Episode
- We don't take those children
 - Not many places will take a child with autism unless verbal (another issue). Turned away "we don't take those kids"
- 1st hospitalization at 5 2 weeks for med adjustment
- Mood disorder NOS
- Hospitalized 6 times last 3 years
- Disruptive mood dysregulation disorder
- Disruptive behavior disorder (immature frontal lobe)
- Hard to determine what is autism and what is mental health

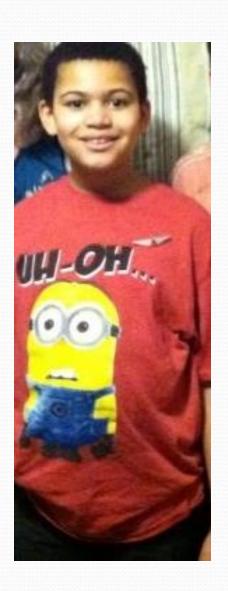


What We Learned

- Not enough information about autism and mental health
- No place to go when child was in crisis
- Not enough child psychiatrist
- Have to be involved, advocate and know people
- Fear of police involvement and lack of training
- Medication management difficult this population
- School was very difficult- suspensions lack of understandings
- Stigma

Logan Today





What Worked Well

- Advocating, Finding advocates
- Education
- Networking
- Being open
- Family Centered Care
- Cultural Competency
- Crisis intervention and inpatient care
- Creative approaches to outpatient care play therapy, sports, cognitive therapy, psychiatry, OT, self care
- Documenting what works and does not- school, medical, home

What is Needed

- Autism diagnosis and mental health information
- Holistic approaches to outpatient interventions
- Crisis management ands inpatient services
- School understanding of mental health
- Cohesive community health system
- Training police officers and first responders
- Culturally competent care

Thank you!

Shaworth@aucd.org



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ASD and Children's Mental Health

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Realities

- Increasing Incidence
- Increasing Complexity
- Increasingly Complicated Lives





Dual Diagnosis

- ADHD
- Obsessive-Compulsive
- Anxiety Disorders
- Depression
- Mood Disorders
- Bi-Polar
- Oppositional Defiant Disorder
- Conduct Disorder





Strategies

- If behavior is an issue, must build a program based on an assessment of the behavior. Must examine context and relationship patterns also. What is our role?
- Have a crisis plan.
- Understand triggers and indicators of escalating behaviors.
- Know the individual and what helps to calm them.



Strategies

- Focus should be on teaching alternative skills such as coping, relaxation, selfmanagement, anger management and so forth.
- Punishment strategies will be less effective.
- Know community and medical resources.





Strategies

- Build a rapport/trust.
- Place the student in situations where they experience success.
- Bottom line...know the child and what works and does not work for them.





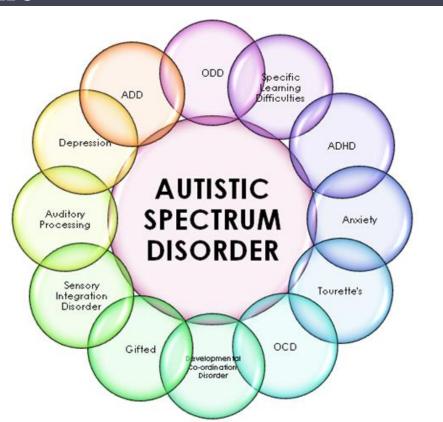
Heidi Cloutier, MSWUniversity of New Hampshire Institute on Disability

Autism Spectrum Disorders (ASD) and Mental Health

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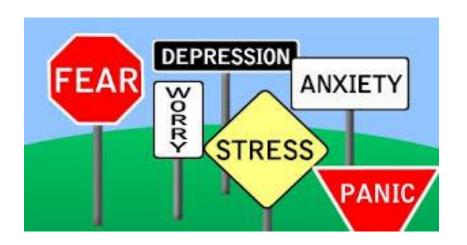


Classifications of Psychiatric Disorders

- Mood Disorder
- Anxiety Disorders
- Psychotic Disorders
- Personality Disorders
- Adjustment Disorders
- Other psychiatric disorders

Most Common Comorbid Mental Health Conditions with ASD

- Anxiety
- Mood
- Attention*



Interventions

- Psychopharmacology
- Cognitive behavior Therapy
- Behavior Support
- Mindfulness Based Therapy
- Social Skills Instruction
- Parent / Family Support
- Person Centered Planning
- Supported Employment



Other Services

- Wellness recovery Planning (WRAP)
- Crisis Intervention Services/ Respite
- Residential Supports & Services
- Family Education





Family-Centered Transition Planning for Students with Autism Spectrum Disorders

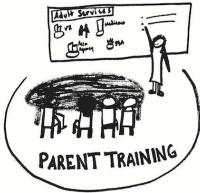
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University of Maine
Center on Community Inclusion
and Disability Studies

FCTP Components



Parent Training (SPECS)

3 Saturdays



Person-Centered Planning

5 - 9 in-home mtgs.

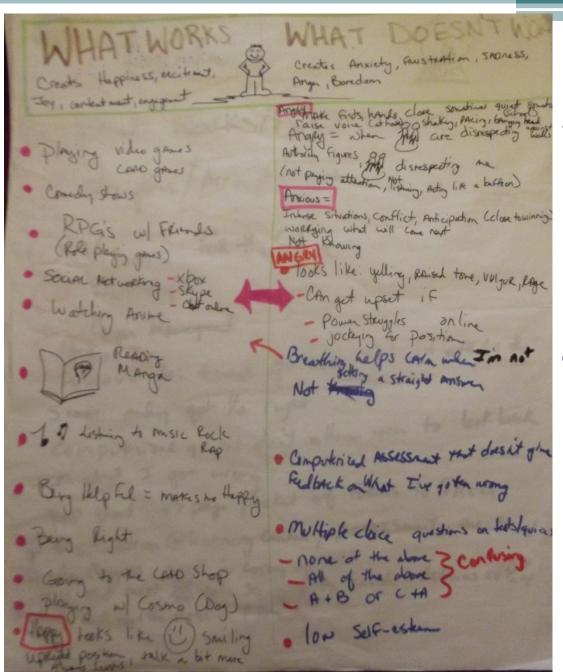


Career Exploration

3 - 6 months

Case Study





What Works/ Doesn't Work

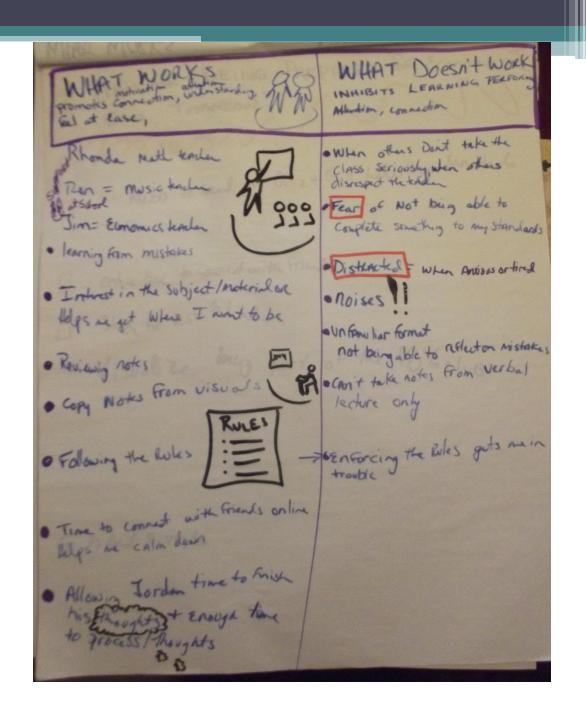
To understand -

- -How emotions manifest
- -What helps
- -What is Important

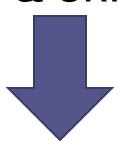
What Works and Doesn't Work



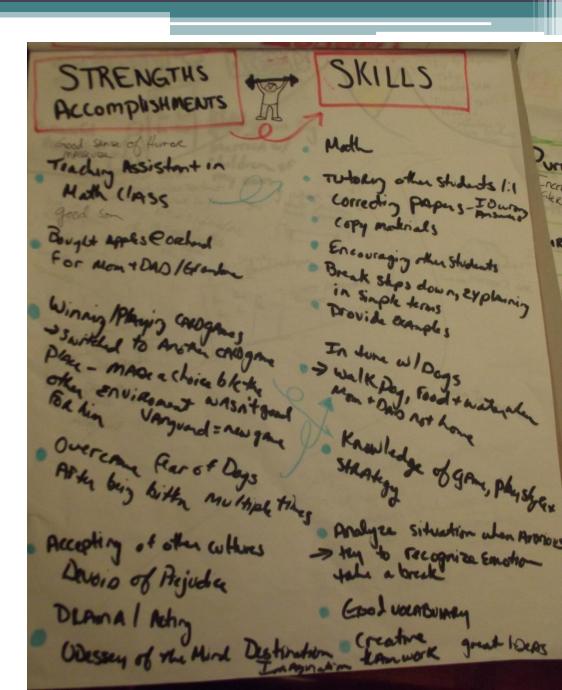
Use to teach how to ask for support

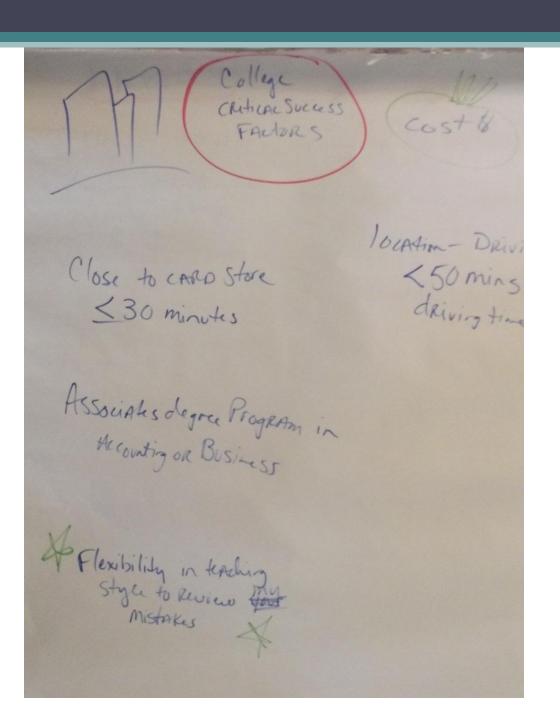


Strengths, Accomplishments & Skills



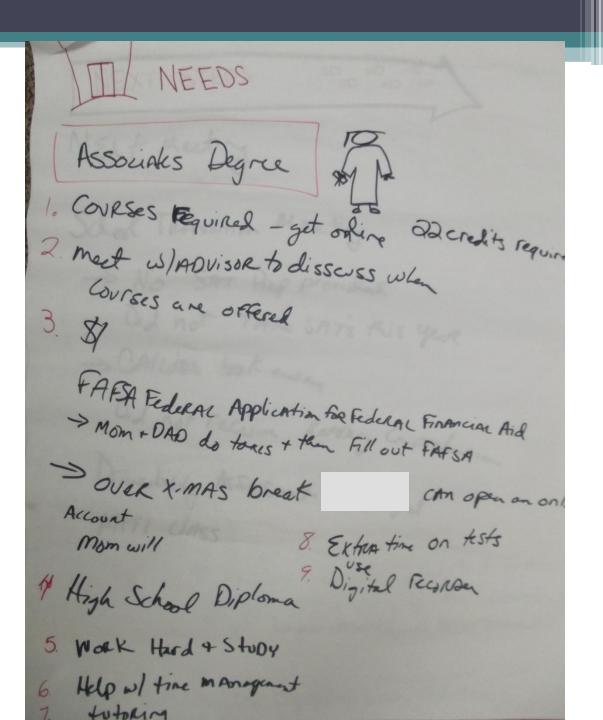
To identify potential careers



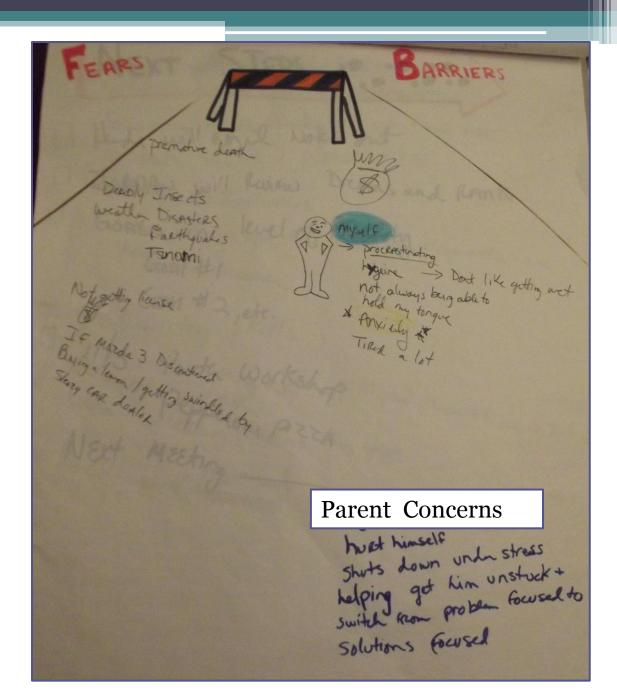


Goal: Graduate College with Accounting Degree

Help break the goal down into steps with supports identified



Family Centered Planning addresses BOTH the needs of the youth and parents/ caregivers



Update



- Started out taking 1 class each semester, gradually increasing workload; two years later carrying a full course load and doing well
- Has made friends at college
- Improved Self Determination skills
- Educational supports
 - Social skills coaching
 - Executive functioning coaching
 - Assistance navigating Disability Services

Conclusion

- ASD and comorbid mental health disorders can cause addition stressors for the individual & their family
- There is a growing need for research and specialized training for professionals and families in mental health and the autism community
- Focusing on strengths, staying solutions focused, and identifying good supports are critical factors for

Resources

- Mary Ellen Copeland's Wellness Recovery Action Planning for Dual Diagnosis http://www.mentalhealthrecovery.com/recovery-resources/
- The Association for individuals with developmental disabilities and mental health needs http://thenadd.org/
- NAMI (National Alliance on Mental Illness)
 https://www.nami.org/Learn-More/Mental-Health-Conditions/Autism
- University of Southern Florida a Guidebook on Mental Health Issues Affecting Autism Spectrum disorders http://card-usf.fmhi.usf.edu/docs/resources/CARD_ASDMH_Brochure092109.pdf

References

- Angold, A., Costello, E. J., & Erkanli, A. (1999). Comorbidity. Journal of Child Psychology and Psychiatry, 40, 57–87.
- American Academy of Child and Adolescent Psychiatry. (1999). Practice parameters for the assessment and treatment of children, adolescents, and adults with autism and other pervasive developmental disorders. Journal of the American Academy of Child and Adolescent Psychiatry, 38, 325–545.
- Bilder, D., Botts, E.L., Smith, K.R., et al. (2012) Excess Mortality and Causes of Death in Autism Spectrum Disorders: A Follow up of the 1980s Utah/UCLA
- Autism Epidemiologic Study. Journal of Autism and Developmental Disorders, Sep 25: 1-9.

References Continued

- Lake J., Perry L., Lunsky Y. (2014) Mental Health Services for Individuals with High Functioning Autism Spectrum Disorders. Autism Research and Treatment Volume 2014, 9.
- Mazzone L., Ruta L., Reale L.. (2012) Psychiatric Comorbidities in Asperger's Syndrome and High Functioning Autism: Diagnostic Challenges. Annals of General Psychiatry 2012, 11:16.
- Van Steensel, F.J.A., Bogels, S.M., & Perrin, S. (2011). Anxiety disorders in children and adolescents with autistic spectrum disorders: A meta-analysis. Clinical Child and Family Psychology Review, 14, 302-317.

References Continued

• Wood, J.J., Drahota, A., Sze, K., Har, K., Chiu, A. & Langer, D.A. (2009). Cognitive behavioral therapy for anxiety in children with autism spectrum disorders: a randomized, controlled trial. Journal of Child Psychology and Psychiatry, 50 (3), 224-234.

Questions and Answers

THANK YOU!

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More Information

Visit the Websites:

- AUCD Website: http://www.aucd.org
- Autism SIG Website: http://www.aucd.org/template/page.cfm?id=508

Ouestions about the SIG?:

SIG Chair – Cathy Pratt: <u>prattc@indiana.edu</u>

Questions about the Webinar?

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Please take a few minutes to complete our survey!

Thank you!