

Autism, Diagnosis and Mental Health

Dr Sue Smith
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Introductions



Dr Sue Smith

About me:

From a neurodiverse family
background- second hand
knowledge

Professional and family
experience of mental health
challenges

Diagnostician

Speech and Language
Therapist



Learning outcomes



Aim of this talk

- Consider how mental health issues might be communicated by autistic people
- Reflect on how this can impact on a diagnostic process and outcomes
- Consider adjustments that might improve recognition and support



Mental health survey results

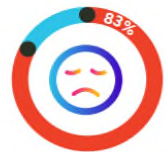
Nearly all autistic adults have experienced anxiety and around two in three have had this diagnosed by a health professional.



94% of autistic adults reported experiencing anxiety.




Almost 6 in 10 said this affected their ability to get on with life.



83% reported experiencing depression.



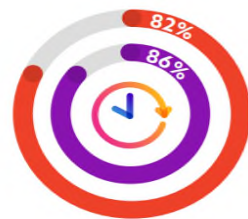
Half said this had a high impact on their ability to get on with life.

Key:  Autistic adults  Families



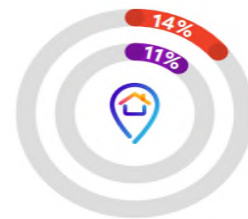
76% of autistic adults

had reached out for mental health support in the last five years.



82% of autistic adults and **86%** of families

said getting support from mental health services took too long.



Only 14% of autistic adults and **11%** of families

said there were enough mental health services in their area to meet their needs.



Almost 3 in 10 fall into the severe depression category based on the PHQ-9.



2 in 5 are currently diagnosed with anxiety and **1/4** have had a diagnosis in the past.



Eight times as many autistic people report feeling often or always lonely when compared to the general population.¹⁴



Autistic people reported **much lower life satisfaction** levels than the general population.¹⁵

Stress and anxiety



Commonly co-considered mental health issues



- Depression
- Anxiety
- Eating Disorders (Inc. ARFID)
- Trauma
- OCD
- Psychosis
- Bipolar Condition
- Personality Disorder/Complex Trauma

Why might it look different for autistic people?

- Non-verbal differences
- Context/Literality/Theory of Mind
- Alexithymia/Interoception
- Push factors/Maintaining Factors
- Trauma
- Less deception/More fact
- Stereotype issues
- Mental health masking effect/autism masking effect

Autism Diagnosis



- Many autistic people seek or are referred for diagnosis at difficult times in their lives when they are more likely to be experiencing co occurring conditions
- Mental health issues are often diagnosed before neurodevelopmental issues and can become 'a full explanation'
- Historically telling 'which one it is' has been an unhelpful focus

Assessment broad strategies



- Be curious and open to things you know less well
- Reduce focus from a binary diagnosis to understanding many layers of a person
- Be interested in the person's early life and what has changed for them over time
- Share what you are thinking and why so that the person can agree or correct
- Be prepared to get things wrong, to reflect and try again-work in partnership



Assessment- more specific adaptations



- Open questions can create uncertainty
- Questions need to be specific and clear without assuming inference or context reading
- Agree with someone what they will find helpful if they become mute/distressed/dis-regulated
- Be ready to use visual approaches/take pauses/see silence as positive
- Be overtly clear that stimming is positive
- Use demand avoidant approaches



Specific considerations in support and treatment

- Wiring versus learning- don't challenge autistic thinking
- Non-verbal and verbal differences
- Visual approaches
- Certainty/clarity
- Partnership and control
- Demand avoidance
- Clear person centred goals (avoid neurotypical assumptions)
- Avoiding 'looking on the bright side'

Specific considerations in support and treatment

- External and Internal sensory differences
- Waiting rooms
- Clarity of written communications
- Executive functioning issues- 'non-compliance'
- Processing times
- Overload
- Need for advocacy and support in session

Take-home points



- Neurodiverse people will not be well served by neurotypical assessment and treatment approaches
- Not everything is about autism, not everything is about mental health
- Be curious, honest and work in partnership
- Avoid rigid protocols and approaches specifically designed for neurotypical populations
- Avoid neurotypical goals and measures of success

Thank you



- ❖ For listening
- ❖ Please feel free to ask questions
- ❖ I can be contacted on Sue.smith3@nas.org.uk

