

# SUPPORTING STUDENTS WITH MENTAL HEALTH AND DEVELOPMENTAL DISABILITIES

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*Flourish Here.*

# Facts

- In 2016, 26% of American adults have a disability
  - Hearing, vision, cognitive, ambulatory, self-care, independent living
- 92% live independently or with family
- A developmental disability is a broad term
- Can be caused before or during birth or during “developmental period”
  - 17% of children have one or more developmental disabilities
- ~40% have a co-occurring psychiatric disorder
  - 2x general population
  - Full range of psychopathology



# What is a Developmental Disability?

- Developmental disabilities are a group of conditions due to an impairment in physical, learning, language, or behavior areas. These conditions begin during the developmental period, may impact day-to-day functioning, and usually last throughout a person's lifetime. (CDC)



# Developmental Disabilities

- ADHD: 9.4%
- Autism Spectrum Disorder: 1 in 44
- Cerebral Palsy: 1 in 345
- Down Syndrome: 1 in 700
- Fetal Alcohol Syndrome: 1 in 1000
- Fragile X: 1 in 7,000-11,000
- Intellectual Disability 7%
- Vision or Hearing Disabilities
- Other medical conditions that may cause developmental delay



# Intellectual Disability



# DSM 5

- **Intellectual Disability** (Intellectual Developmental Disorder) is a disorder with onset during the developmental period that includes **both intellectual and adaptive functioning deficits** in conceptual, social, and practical domains.
  - Specifiers:
    - Age of onset
    - Associated with medical or genetic condition or environmental factors
    - Severity



# Severity levels

- Based on adaptive functioning NOT IQ
- 85% mild, 9% moderate, 4% severe, 2% profound

	Conceptual	Social	Practical
Mild			
Moderate			
Severe			
Profound			



# Conceptual domain

- Language
- Reading
- Writing
- Math
- Reasoning
- Knowledge
- Memory





# Social domain

- Empathy
- Social judgment
- Interpersonal communication skills
- The ability to make and retain friendships



# Practical domain

- Self-management in areas such as:
  - Personal care
  - Job
  - Responsibilities
  - Money management
  - Recreation
  - Organizing school and work tasks



# Psychopathology

- This population is especially vulnerable to psychiatric disorders
  - Psychological burdens of DD
  - Poor problem solving, coping skills, and emotional control
  - Poor environmental and/or social support
- Can suffer from all psychiatric conditions, though may not present “typically”



# Differential Diagnosis

- Since presentation may not be typical, you may have to weed out what is part of the DD and what is mental health symptomology
- Diagnostic overshadowing
  - Clinicians downplay or ignore mental health symptomology when they are working with a client with an intellectual disability
  - DD is more noticeable
  - May be seen as more substantial
- Behavioral vs. mental health symptomology



# Dual Diagnosis

- The co-existence of the symptoms of both intellectual or developmental disabilities and mental health problems
  - ID and Major Depressive Disorder
  - Cerebral Palsy and Generalized Anxiety Disorder
  - Autism and Bipolar Disorder
  - Traumatic Brain Injury and Borderline Personality Disorder
- May present differently than clients without DD



# Advocacy

- Know your student's baseline
  - What is "normal" for them?
- Know your student's history
  - Are they already diagnosed with a mental illness? Is there a family history?
- Understand their DD diagnosis
  - What are the physical and/or mental complications that may co-occur?
- Advocate for your student
  - Don't overshadow them though



# What is “Normal”?

- Happy?
- Excited to do things?
- Wants to go to school/work/activities every day?
- Doesn't worry about things?
- Wants to be around people?



# What to look for...

- Has there been a change in their mood?
- Has there been a change in their activity level?
- Are they more worried than normal?
- Do they obsess about things or feel compelled to do things?
- Are they drinking/using substances (more than usual)?
- Has there been an event that could cause issues (death, trauma, break-up, job loss, etc.)?
- Any other things that are out of that student's "norm"





# Mental Health Disorders

- Mood Disorders
- Anxiety Disorders
- Other Mental Health Disorders
  - Adjustment Disorder
  - Disruptive, Impulsive Control, and Conduct Disorders
  - Post Traumatic Stress Disorder
  - Substance Use Disorders
  - Schizophrenia Spectrum, Psychotic, or Delusional Disorders



# Mood Disorders



# Depression

DSM Symptomology	Presentation in person with DD
Sad Mood	Agitated or irritable mood
Low energy or motivation	High energy with anger or agitation
Poor concentration	Poor concentration with low frustration tolerance
Change in eating or sleeping habits	Same
Loss of pleasure in activities	Same
Thoughts of harming self	Actions that harm self, expressed wish to be dead



# Bipolar Disorder

DSM Symptomology	Presentation in person with DD
Grandiosity	Presenting self as staff, plans to move out on their own, Refuse medications, Inappropriate social interactions, Exaggeration of skills or stature
Rapid or pressured speech	Continuous yelling or vocalizations, uncontrollable or ill-timed laughing, repetitive questions, frequent interruptions, disjointed thoughts
Elevated mood or irritability	Hyperactivity, laughing, giggling, smiling, playfulness, difficulty respecting boundaries, self-injury, aggression, non-compliance, agitation
Decreased sleep	Disruptive nighttime behaviors
Hedonistic Activities	Increased sexual behaviors, teasing peers, connecting with strangers online, binge eating
Distractibility	Difficulty attending to activities previously found pleasurable



# Anxiety Disorders



# Generalized Anxiety Disorder

- Similar to typical presentation but may also include:
  - Somatic complaints
  - Rumination
  - Sleep disorders
  - Being very needy or attention seeking
  - Requesting a lot of reassurance



# Panic Disorder

- Panic attacks
  - Aggression
  - Agitation, screaming, crying
  - Difficulty or shallow breathing
  - Physical complaints
  - Resistance to leaving home
  - Increased dependency needs
  - 911 calls
  - Wanting to go to the hospital or ER
  - AWOL



# Obsessive Compulsive Disorder

- Recurrent obsessions and/or compulsions that are severe, disabling, and/or time consuming and/or cause high levels of stress or impairment
- Complex motor rituals
  - Rubbing, touching, tapping, self-mutilation, skin picking, staring
- Repetitive behaviors
- Rigidity and repetitiveness
- Tic, sensory, or OCD?
  - No response vs. agitation and anxiety





# Other Mental Health Diagnoses



# Adjustment Disorder

- Can include depressed mood, anxiety, disturbance or conduct, or mixed disturbance or emotions and conduct
- Related specifically to some kind of change
  - Either by choice of the person or the choice of others
- Clinging, apparent loss of skills, withdrawal, irritability, aggression, self-injury, destructiveness, and non-compliance
- Short term



# ADHD

- ADHD
  - Inattention
  - Hyperactivity
  - Impulsivity
- Must compare with developmental peers



# Disruptive, Impulsive Control, and Conduct Disorders

- Oppositional Defiant Disorder
- Conduct Disorder
- Intermittent Explosive Disorder



# Post Traumatic Stress Disorder

- 60% of people with DD experience trauma
- Person experienced, witnessed, or was confronted with an event(s) that involved actual or threatened death or threat to the physical integrity of self or others; experienced fear, helplessness, or horror
- Re-experiencing the event
  - Sleep disturbances, irritability, outburst, aggression, difficulty concentrating, hyper vigilance, exaggerated startle reflex
  - Avoidance of stimuli associated with the trauma



# Substance Use Disorders

- Use
- Intoxication
- Withdrawal



# Schizophrenia Spectrum, Psychotic, or Delusional Disorders

- Difficult to appropriately diagnose
- Schizophrenia
- Delusional Disorder
- Brief Psychotic Disorder
- Schizophreniform Disorder
- Schizoaffective Disorder
- Schizotypal Personality Disorder



# Medical Contributors

- Gastrointestinal conditions
  - Dysphagia
  - GERD
  - Constipation
- Urological conditions
- Asthma
- Sleep Apnea
- Seizures
- Endocrine disorders
- Nutritional deficiencies
- Neurological disorders
- Cancer
- Cardiovascular disease
- Pain





# Support and Referral Options

- Teachers/Intervention Specialists
- School Counselor
- School Social Worker
- Service Coordinator
- Case Manager
- Clinical Counselor
- Psychologist
- Psychiatrist
- Primary Care Doctor



# What can you do?

- Know the student's baseline
- Be aware of changes
- Be an advocate
  - Does mental health need included in the 504/IEP?
- Communicate with a multidisciplinary team
- Be supportive



# Questions?





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THANK YOU