

EAMHID



**EUROPEAN ASSOCIATION FOR MENTAL HEALTH
IN INTELLECTUAL DISABILITY**

**Mental well-being: prevention of
self-harm, suicide, depression and
anxiety in persons with Intellectual
Disability**

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Masterclass: Str. Răsăritului, nr. 59,
Sector 6, București, România**

Aims

- To examine and understand:
 - depression in people intellectual disability
 - mental health promotion and mental wellbeing
 - risk factors, of and how to manage suicide risk in the intellectual disability population

Introduction

- People with intellectual disability experience depression the same as others
- In some people with intellectual disability symptoms of depression and other mental health conditions may present differently
- It used to be commonly believed that intellectual disability protected individuals from suicidal thoughts and behaviours.
- The reality is as in the general population, people with intellectual disability, can think about, attempt and die by suicide.

What is Intellectual Disability?

- A significantly reduced ability to understand new or complex information, to learn new skills (impaired intelligence) with
- A reduced ability to cope independently (impaired social functioning)
- Which started before adulthood, with a lasting effect on development
- (DoH 2001)

Risk of common mental health problems in people with intellectual disabilities

- People with intellectual disabilities have higher rates of
 - mental health problems, than found in those without intellectual disabilities
 - schizophrenia estimated at three times greater than the general population (3% vs 1%)
 - dementia is much higher amongst older adults with intellectual disabilities and is associated with an earlier onset in some groups such as People with Down's syndrome onset from 30-40
 - Reported prevalence rates for anxiety and depression is reported to be at least the same as the general population, but some estimate higher

Diagnostic criteria for depression ICD-10

- **Key symptoms:**

- persistent sadness or low mood; and/or
- loss of interests or pleasure
- fatigue or low energy
- at least one of these, most days, most of the time for at least 2 weeks

- Other symptoms to consider:
- disturbed sleep
- poor concentration or indecisiveness
- low self-confidence
- poor or increased appetite
- suicidal thoughts or acts
- agitation or slowing of movements
- guilt or self-blame

What puts people at risk of depression?

- Biological
 - A family history of depression may increase a person's risk
 - Imbalances of certain chemicals in the brain may lead to depression
 - Medication and prescribed drugs.
 - Major Illnesses e.g. heart attack, stroke, diabetes or cancer
 - Comorbid genetic disorders e.g. Down Syndrome
- Psychological
 - Stress
 - Anxiety, which may also mask presentation
 - No sense of belonging negative thinking
 - Life events e.g., the death of a loved one or a promotion.
- Social
 - Poverty
 - Lack of support
 - Unemployment
 - Lack of opportunity
- Depression can also occur for no apparent reason!

How can we see when someone with intellectual disabilities is depressed

- Changes in behaviour and attitude, many people who do not work with people with ID will not see this
- General Neglect of responsibilities and appearance
- Poor memory, inability to concentrate, slowing down
- Difficulty making decisions
- Physical changes e.g. eating and sleeping
- An increase in challenging behavior
- Suicidal thoughts, feelings or behaviors

Diagnostic Overshadowing

- the process of attributing symptoms to a particular condition, resulting in key conditions being undiagnosed and untreated
- E.g. The doctor assumes that the patient with intellectual disabilities is self injuring because of their intellectual disability and therefore doesn't investigate any further

Psychosocial Masking

- Not understanding or knowing what may be developmentally appropriate. You can only have delusions based on your experience and what you know about.
- A delusion of being the son of the head of the residential home the person lives in may be mistaken for a harmless fantasy
- Imagination may also be mistaken for a delusion

LD Assessment and Communication

- Communicate with the person with intellectual disabilities first, not the carer – this is the most frequent complaint from people with intellectual disabilities
- However, don't be shy to ask a carer for information or to help with communication
- Visual prompts can help

Problems with psychiatric Diagnosis in people with intellectual disabilities

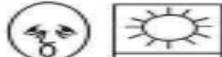
- There may be difficulty in understanding questions and answers
- Understanding of language or psychological states such as anxiety and depression
- Acquiescence or suggestibility and the tendency to “please” others
- Atypical presentations e.g. sleep less or eat more, behavioral changes

LD: Assessment, Communication

- Keep speech simple, jargon-free, one concept at a time.
- Beware acquiescence:
 - Are you happy? Yes
 - Are you sad? Yes
 - Are you Captain Amnerica ? Yes
- Beware suggestibility:
 - Are you happy or sad? Sad
 - Are you sad or happy? Happy

Glasgow Depression Scale

(score of 13 or over indicates depression).

In the last week...		Prompts	no	some times	a lot
1.	 Have you felt sad?	Have you felt upset, depressed, miserable, fed up, low?	0	1	2
2.	 Have you been in a bad mood?	Have you felt bad tempered, wanted to shout at people?	0	1	2
3.	 Have you enjoyed doing things?	Have you had fun?	2	1	0
4.	 Have you enjoyed talking and being with people?	Have you liked having people around?	2	1	0
5.	 Have you had a bath/shower and changed your clothes?	Have you taken care of the way you look / appearance?	2	1	0
6.	 Have you felt tired during the day?	Have you gone to sleep during the day, found it hard to stay awake?	0	1	2
7.	 Have you cried?	What made you cry?	0	1	2
8.	 Have you felt people don't like you?	Have you felt you are a horrible person?	0	1	2
9.	 Have you been able to concentrate, such as watch TV?	What is your favourite TV programme? Are you able to watch it all?	2	1	0
10.	 Have you found it hard to choose things?	Have you found it hard to decide what to wear, eat or do?	0	1	2

In the last week...			Prompts.	no	some times	a lot
11.		Have you found it hard to sit still?	Have you fidgeted, moved around a lot more?	0	1	2
12.		Have you eaten less? Have you eaten more?	Have people said you should eat more or less?	0	1	2
13.		Have you found it hard to get a good night's sleep?	Have you found it hard to fall asleep, woken up a lot or too early?	0	1	2
14.		Have you wished you were dead?	Have you wanted to stop living?	0	1	2
15.		Have you felt everything is your fault?	Have you felt people blame you for things?	0	1	2
16.		Have you felt people are looking at you, talking about you?	Have you worried about what other people think of you?	0	1	2
17.		Have you been upset if people say you have done something wrong?	Do you feel sad, or feel like crying if someone tells you off?	0	1	2
18.		Have you felt worried?	Have you felt nervous, tense, wound up or on edge?	0	1	2
19.		Have you thought that bad things will happen to you?	Have you felt nothing nice happens to you?	0	1	2
20.		Have you felt happy when something good happens?	What makes you feel happy?	2	1	0

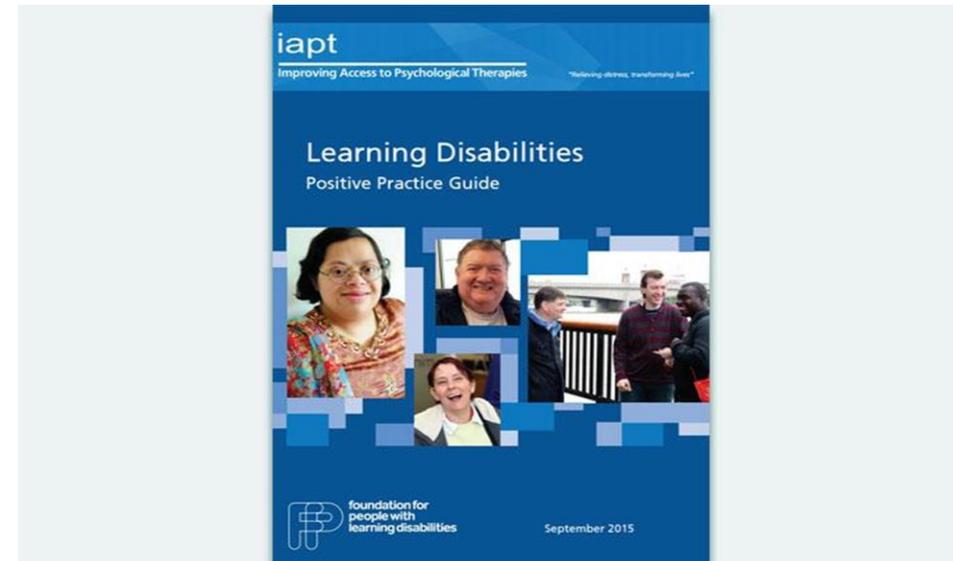
Cuthill, F. M., Espie, C. A., Cooper, S (2003) Development and psychometric properties of the Glasgow Depression Scale for people with a learning disability: Individual and carer supplement versions. *The British Journal of Psychiatry* 182:347-353. Adapted by MK, GB, GW, DHCFT 2008.

Resources from the Foundation of People with Learning Disabilities

<https://www.mentalhealth.org.uk/learning-disabilities/our-work/health-well-being/easy-read>

<https://www.mentalhealth.org.uk/learning-disabilities/publications/learning-disabilities-iapt-positive-practice-guide>

<https://www.mentalhealth.org.uk/sites/default/files/feeling-down-report-2014.pdf>



Guided self-help (GSH)?

- GSH is defined as a CBT-based self-help resource used with limited support from a health care professional.
- GSH using CBT techniques is considered an effective treatment for mild depression.
 - NICE Guidelines on Depression
- Not to be confused with other forms of self-help, such as books bought over the counter.

Guided Self-help

for People with Intellectual Disabilities
and Anxiety and Depression



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Example 1

John felt upset so he looked at his SAINT book. Looking at the feelings list he saw number **6 – I feel down.**

Number 6 is about sadness.



John put the number 6 in his diary and thought: 'I must look at the ideas for coping in the SAINT book to see if I can help myself'.

The coping list gave John ideas that could help him.

He thought, 'I know, I will listen to music.' This was number **16 – listening to music or watching TV.**

John put number 16 in his diary.

John also wrote a note in his diary that this made him happy.

WEEKLY DIARY	
Monday 6 16 I felt sad this morning and listening to music made me feel better	Friday
Tuesday	Saturday
Wednesday	Sunday
Thursday	NOTES

Self-Assessment and **Int**ervention: The **SAINT**



Helping people help themselves.



This book was written to help people who are feeling upset.



This book can be used to record how you feel.



This book will help you recognise your feelings.



This book can also let others know when you are feeling upset.



In the book is a diary. You can write how you feel in the diary.

	<p>4. I find it difficult to do things</p> <ul style="list-style-type: none"> » I am losing interest in things. » I don't feel like going out. » I can't be bothered to change my clothes. » I have stopped activities and/or going out. 	<p>If you had any of these thoughts, write number 4 on today's date in the diary.</p>
	<p>5. I am having problems sleeping</p> <ul style="list-style-type: none"> » I have trouble getting off to sleep. » I have trouble waking up. » I keep getting up during the night. » I feel tired all the time. 	<p>If you had any of these thoughts, write number 5 on today's date in the diary.</p>
	<p>6. I feel down</p> <ul style="list-style-type: none"> » I feel sad. » I feel worried. » I feel tense. » I feel stressed. 	<p>If you had any of these thoughts, write number 6 on today's date in the diary.</p>

	<p>14. Go out</p> <ul style="list-style-type: none"> » I will go out somewhere to make myself feel better. » I will go and see friends. » I will go and do something like the cinema or shopping. 	<p>If you did any of the activities, write the number 14 on today's date in the diary.</p>
	<p>15. Relaxation</p> <ul style="list-style-type: none"> » I will do some relaxation exercises. » I will do deep breathing. » I will listen to a relaxation tape. » Use nice smells (aromatherapy, scented candles). 	<p>If you did any of the activities, write the number 15 on today's date in the diary.</p>
	<p>16. Listening to music or watching TV</p> <ul style="list-style-type: none"> » I will go and listen to music. » I will play music or sing. » I will watch TV. » I will watch a DVD or video. 	<p>If you did any of the activities, write the number 16 on today's date in the diary.</p>

Extra resources

Worksheet 6: Feelings

Angry



Anxious



Disgusted



Happy



Mental health problems (1 of 4)



Sometimes things go wrong in a person's life.

These things could be:

- » falling out with friends
- » if someone is bullied or abused
- » losing someone special.



Sometimes things change in a person's life, like;

- » moving home
- » a friend moving away
- » losing a job.



When these things happen we might become stressed.

We might feel down.

We might feel nervous or worried.

Most people feel like this for a little while.

Most people get back to normal quickly.

But sometimes people might feel like this for longer.

When this happens it is called a mental health problem.

A mental health problem is a type of illness.

Worksheet 2: Linking thoughts, feelings and behaviours for depression

Free CBT in intellectual disabilities manual, worksheets and resources download

<https://www.ucl.ac.uk/psychiatry/research/epidemiology-and-applied-clinical-research-depa/principal-investigators/hassiotis-5>

» An example for depression



- » What you **think** – there is no point in going out
- » How you **feel** – sad, depressed
- » What you **do** – stay in bed

Reproduced and adapted with permission from Hassiotus *et al* (2013) *A Manual of Cognitive Behaviour Therapy for People with Learning Disabilities and Common Mental Disorders*. London: Camden & Islington NHS Foundation Trust and UCL.

Guided Self-help for People with Intellectual Disabilities and Anxiety and Depression
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Worksheet 8: Certificate

GSH
certificate

Congratulations!

you have finished your GSH.

Worker: _____

Date: _____

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Example of Easy Read Information from Feeling Down Guide



How you feel when you are down, worried or depressed

Each person is different. Some people say they feel physically unwell. Feelings (symptoms) they describe are:



Dizziness



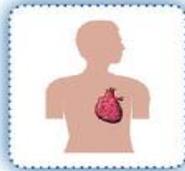
Sweaty hands



Feeling tense



Not sleeping
Being more tired than usual,
so it's hard to get up in the morning



Heart beating
fast



Mouth ulcers



Wanting to bite
your fingernails



Feeling sick
Butterflies in the stomach
Diarrhoea or stomach pains

1. What is mental health? 17

<https://www.mentalhealth.org.uk/sites/default/files/feeling-down-report-2014.pdf>

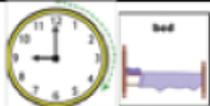
Example from the Feeling Down guide:

Things I Feel In My Body
If you have felt these things, put a tick in the box

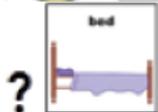
	Pain in my tummy <input type="checkbox"/>		My breathing was difficult <input type="checkbox"/>
	Pain in my head <input type="checkbox"/>		I was sick <input type="checkbox"/>
	Voices in my head <input type="checkbox"/>		Not sleeping <input type="checkbox"/>
	My heart beating faster <input type="checkbox"/>		My hands were sweaty <input type="checkbox"/>

3. What to do when you are worried about your mental health 52

<https://www.mentalhealth.org.uk/sites/default/files/feeling-down-report-2014.pdf>



What time did I go to bed?



What did I do in bed?(Read, TV, sex)



What time did I put the lights out?



How many minutes before I fell asleep?



What time did I wake up at?



Number of times I woke up?



Number of hours I slept

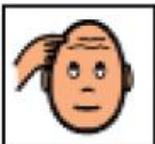


On waking up in the morning, how rested do I feel? 0 – 10
(10 most rested)

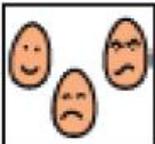
What can we do for you?



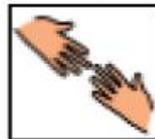
You can talk with one of our workers who will ask you questions



You can talk about how you think



You can talk about how you feel



We can support you to deal with unhelpful thoughts



We can offer you ways of feeling better

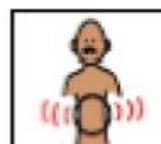
What is Anxiety?



When you are worried and stressed you might feel anxious



You might feel short of breath



You might have a sore tummy



You might feel hot

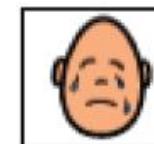


You might feel tingly

What is Depression?



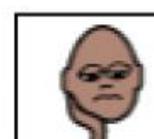
Depression affects a lot of people



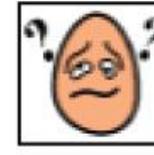
You might feel sad or tearful



You might feel tired and find it hard to sleep



You might not be interested in the things you like



You might find it hard to concentrate

Suicide risk

- Evidence suggests higher rates of suicidal thoughts in people with intellectual disabilities
- Suicidal attempts can go unnoticed or are misconstrued e.g. believing that an act might be lethal which isn't

Suicide risk and screening

- The suicide risk factors are in keeping with the general population
 - A diagnosis of clinical depression
 - history of self-harm
 - Unemployment
 - Loneliness
 - Unemployment
 - An increased need for support from others
 - Early onset mental illness
 - Being treatment resistive

Signs

- Be careful to understand what is significant to the person
- Life events maybe different
- a change of staff
- A change in a role or job

Don't forget



Don't try to cope on your own



I am feeling very sad can you

help me please



Learn how to stay safe and not

hurt yourself when you feel very sad



Talking to someone is the best thing you can

do when you feel sad



Things that make you feel sad are called

TRIGGERS

- <https://www.prevent-suicide.org.uk/find-help-now/stay-safe/>

My Safety Plan

If I feel I cannot stay safe from suicide...

I will talk to: _____

I will seek help from: _____

I will calm myself by: _____

I will go to my safe space: _____

My ideas for keeping safe: _____

Reasons for Living

Myself

I care enough about myself to live

I have the courage to face life

I want to experience all that life has to offer and there are many experiences I haven't had yet which I want to have

No matter how badly I feel I know that it will not last

I believe I can learn to adjust or cope with my problems

I am afraid of the unknown

Family and Friends

It would hurt my family and friends too much and I would not want them to suffer

I would not want my family and friends to feel guilty afterwards

Family and Friends (continued)

I have a responsibility and commitment to my family and friends

I love and enjoy my family and friends too much and could not leave them

My family and friends might believe I did not love them

Understanding my choices

I believe killing myself would not really accomplish or solve anything

I do not want to die

I believe I have control over my life and destiny

I am afraid of the actual "act" of killing myself

Hopes and beliefs

I have hope that things will improve and the future will be happier

I believe I can find other solutions to my problems

I believe I can find a purpose in life, a reason to live

I am curious about what will happen in the future

Life is all we have and is better than nothing

Your own reasons

Version 1.1 © 2016-2019 Grassroots Suicide Prevention



Conclusion

- People may be more difficult to diagnose with mental health conditions in some cases as their presentation may differ
- People with intellectual disability can benefit from a wide range of treatments including psychological therapies
- Offer choice where possible some treatments may work better for certain individuals

Muțumesc

Alte întrebări?