

Briefing

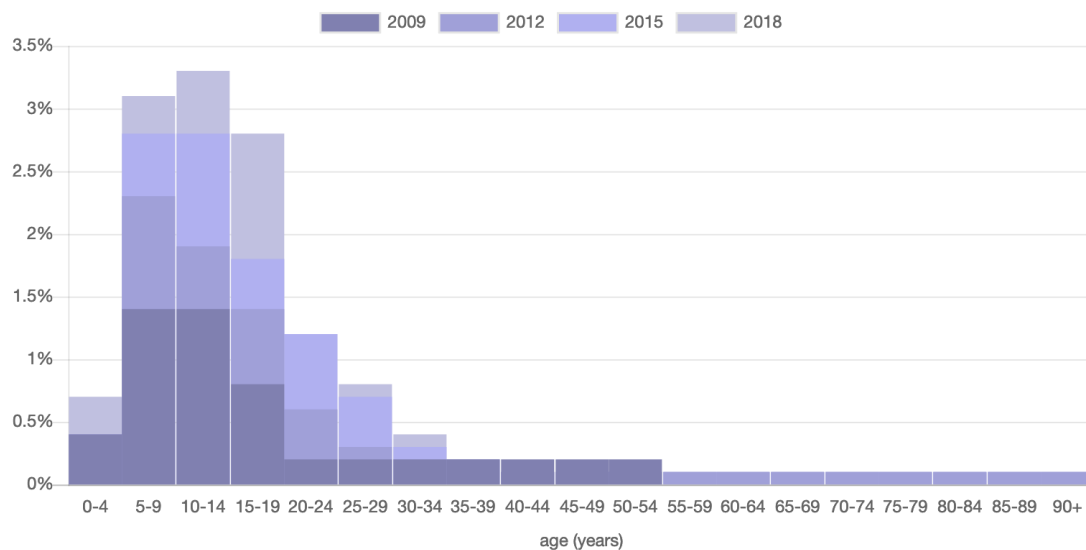
Autism and Mental Health

The DSM-5 regards Autism Spectrum Disorder as a neurological disorder. The DSM-IV called it a “developmental disorder”. ICD-11 seems similar to the DSM-5 (and the ICD-10 resembled the DSM-IV) in relation to “autism”.

Autistic people have very high levels of mental illness and suicide (there is plenty of overseas material in Pubmed).

The following figure shows the estimated number of autistic Australians by age, over time. The ABS published these data from its *Survey of Disability, Ageing and Carers* (SDAC). The NDIS and other datasets show a similar pattern.

ABS SDAC Autistic Australians (percent estimate)



The number of autistic Australians increased substantially over several decades. This is a very different population pattern to disability generally ... where numbers increase with age.

Mostly, children are diagnosed autistic. Many autistic adults are not diagnosed; it seems likely that fewer than 1 in 10 autistic adults in Australia are diagnosed. Autistic Australians mostly (~69%) have severe or profound disability. Increased diagnosis is only due in a small part to the diagnosis of milder cases.

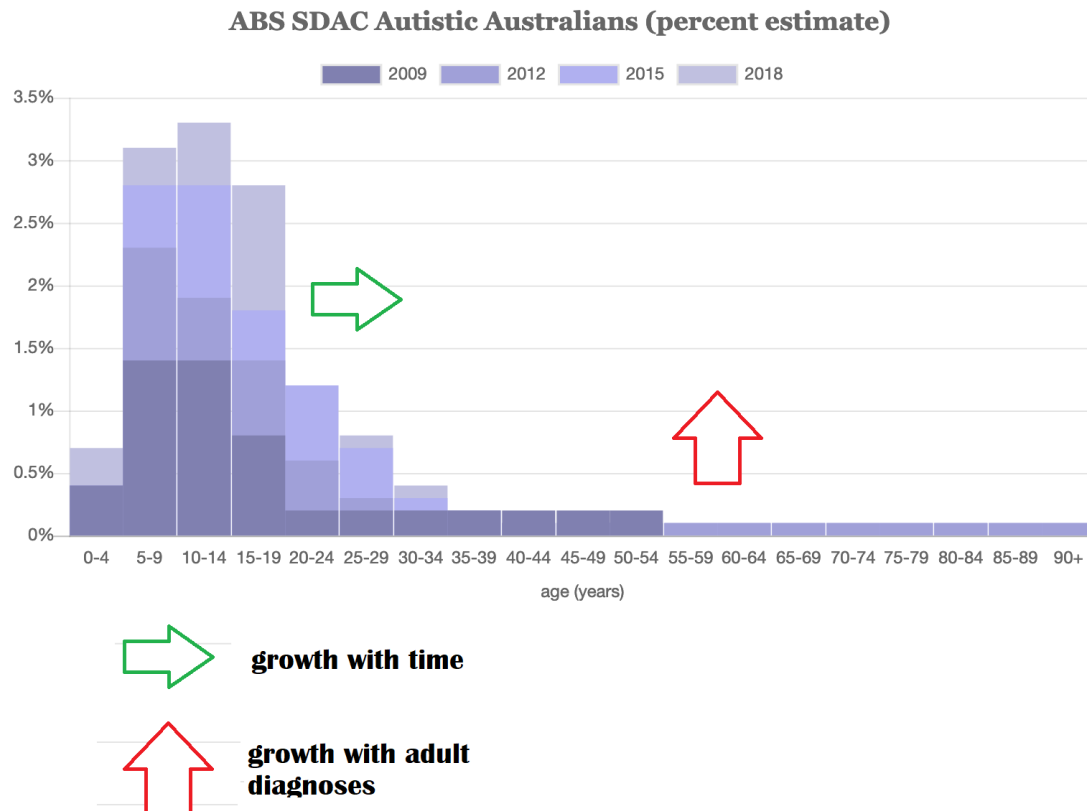
Women and girls are under-diagnosed: the ratio progressed from 4:1 male to female to nearer 3:1 in more recent data.

State and federal health departments provide little of no funding for adult diagnosis. Few clinicians are trained to diagnose, treat, and support autistic Australians.

Funding for diagnosing children is inadequate too.

Key points:

1. There appears to be chronic underdiagnosis of autistic adults
2. ASD diagnosis is usually too late for government early intervention programs. Evidence-based (good or best) practice early intervention improves outcomes dramatically for most autistic children.
3. Health professionals need to respect people with disability – respect that their lives are equally valuable and that they also need the best lives they can have.



Growth in numbers is slowing but is still substantial.

Mostly, autistic people with mental illness are turned away from (denied) mental health services.

- Many autistic adults have undiagnosed ASD - some clinicians observe that “treatment-resistant” and unresponsive patients are often undiagnosed autistics.
- Many health and especially mental health services, when told a patient is autistic, say “we don’t treat autistic people” – often they simply do not know how to treat autistic people.
- Specialist “dual diagnosis” services set up after Burdekin Report in the 1990s are for people with both Intellectual Disability and mental illness, not for autism and mental illness (latest Victorian mental health report asks for this strategy to be repeated without acknowledging that it failed last time).

Mental health clinicians often say/believe “I can’t treat autistic people. I cannot make them ‘normal’ so I cannot help their anxiety or their depression, their trauma or

whatever other mental health needs they have. No matter what I do, they will not be 'normal', they will still be autistic, so I won't even try". Autistic people with depression need help to become an autistic person with less (or no) depression. Similarly, for other mental health conditions. Autistic people need the same access to mental health services as other people.

Actions

- Comprehensively monitor and report service needs, service delivery and outcomes for autistic Australians (ensuring unmet need is properly monitored and reported).
- Inclusive health services, especially mental health services – stop treating autistic people as 2nd or 3rd rate citizens.
- Teach graduates in the health sector how to include autistic people in mainstream health and mental health services; that is, how to provide effective health and mental health services for autistic people (and people with other disabilities).
- Improve ASD diagnosis, including ASD diagnoses for adults.
- Recognise autism in mental health patients, provided it does not lead to denial of services (see above).

10/3/2021