

The Impact of Mental Health Diagnosis and Behavioral Support Needs on Personal Opportunity Outcomes for Adults with IDD



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Who Are We?



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Background

Research suggests that people with intellectual and developmental disabilities (IDD) have a higher prevalence of mental health conditions and behavioral support needs than the general population.

- Better research on rates is needed.
- What does this mean for service users and staff?
- How can we support people living in the community?

Research Goals

1

Frequency of Occurrence

Establish rates of diagnosed mental health conditions and reported behavioral challenges in a representative sample of HCBS users

2

Relationship

Understand the relationship between mental illness and behavioral challenges

3

Impact

Explore the impact of mental health conditions and behavioral support needs on services and outcomes

Training Goals

Understand
mental health
diagnoses and
behavioral
support needs



Understand
implications on
important life
outcomes for
people with IDD



Knowledge and tools to
advocate alongside people
with IDD, for better mental
health and behavioral
supports.

Definitions

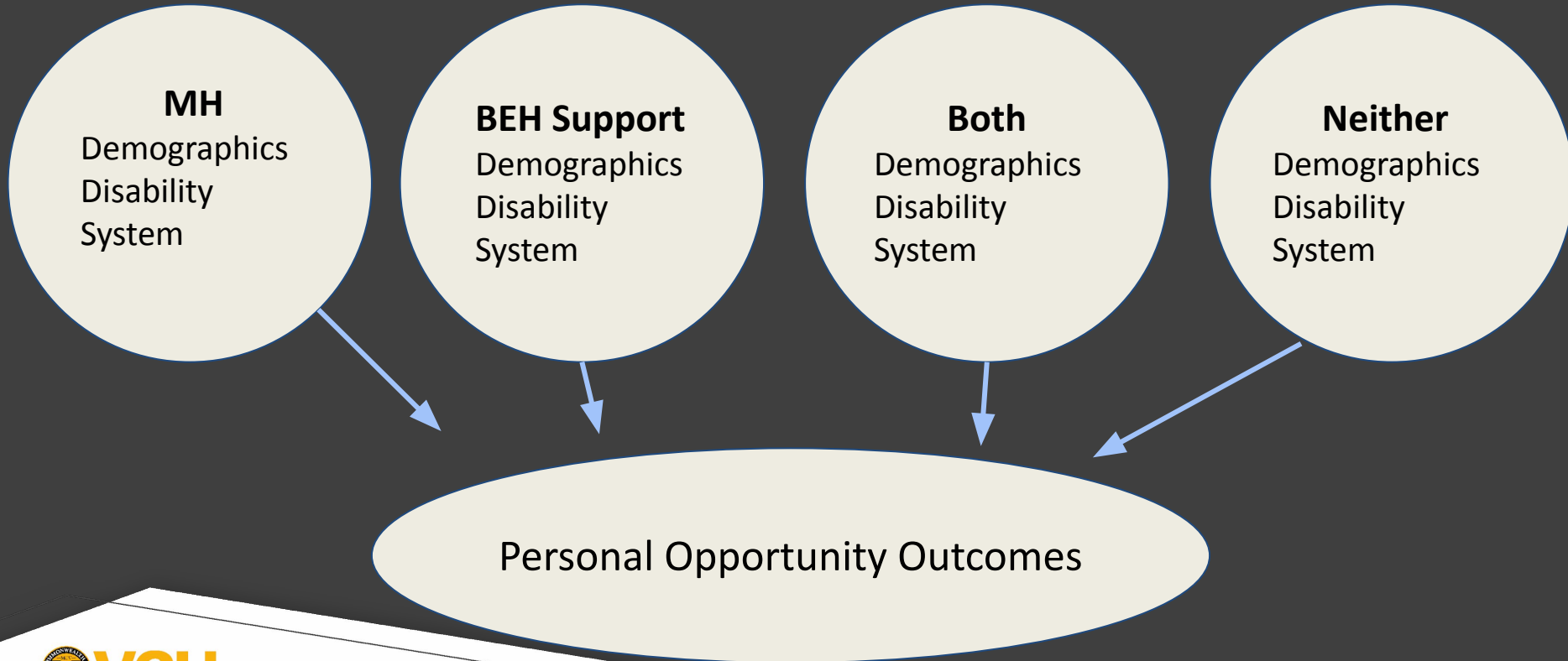
Mood Disorder: Includes depression, bipolar, etc. These are conditions that affect a person's mood, either depressing it or elevating it.

Anxiety Disorder: Includes generalized anxiety, panic disorder, specific anxieties that may only come up in context

Psychotic Disorder: Includes schizophrenia, schizoaffective, etc. May experience hallucinations, delusions, stupor, etc.

Other MH Condition: Our research tool is inexact so this category includes things like obsessive compulsive disorders, ADHD, etc.

Research Question



Method: Merged Data Sources

Virginia Medicaid LTSS: total service cost from all Medicaid-funded LTSS services

Supports Intensity Scale (SIS-A): level of support needs, including special categories for extraordinary medical or behavior support need

National Core Indicators - In Person Survey: face-to-face survey of adults who use at least one state-funded service in addition to case management

Personal Opportunity Outcomes

Rights

- Lock bedroom door
- Key to home

Choice

- Schedule
- Free time
- Spending money

Community Participation

- Shopping
- Errands
- Eating out
- Entertainment

Variables

Demographics

- Race
- Age
- Gender

Disability Characteristics

- Level of ID
- Communication
- Mobility
- Other diagnoses

System-Level Factors

- Residence
- Guardianship
- Medication
- Behavior Plan

Results: Mental Health Conditions

29.2% Mood Disorder

14.3% Psychotic Disorder

8.6%

24.4% Anxiety Disorder

Other MH
Disorder

Behavioral Support Needs

Behavior challenges: 34.16%

ADHD, aggression, self-injurious behavior, pica, etc.

Self-injurious behavior: 28.49%

Attempts to cause harm to one's own body (hitting or biting self, scratching or puncturing skin, or ingesting inedible substances)

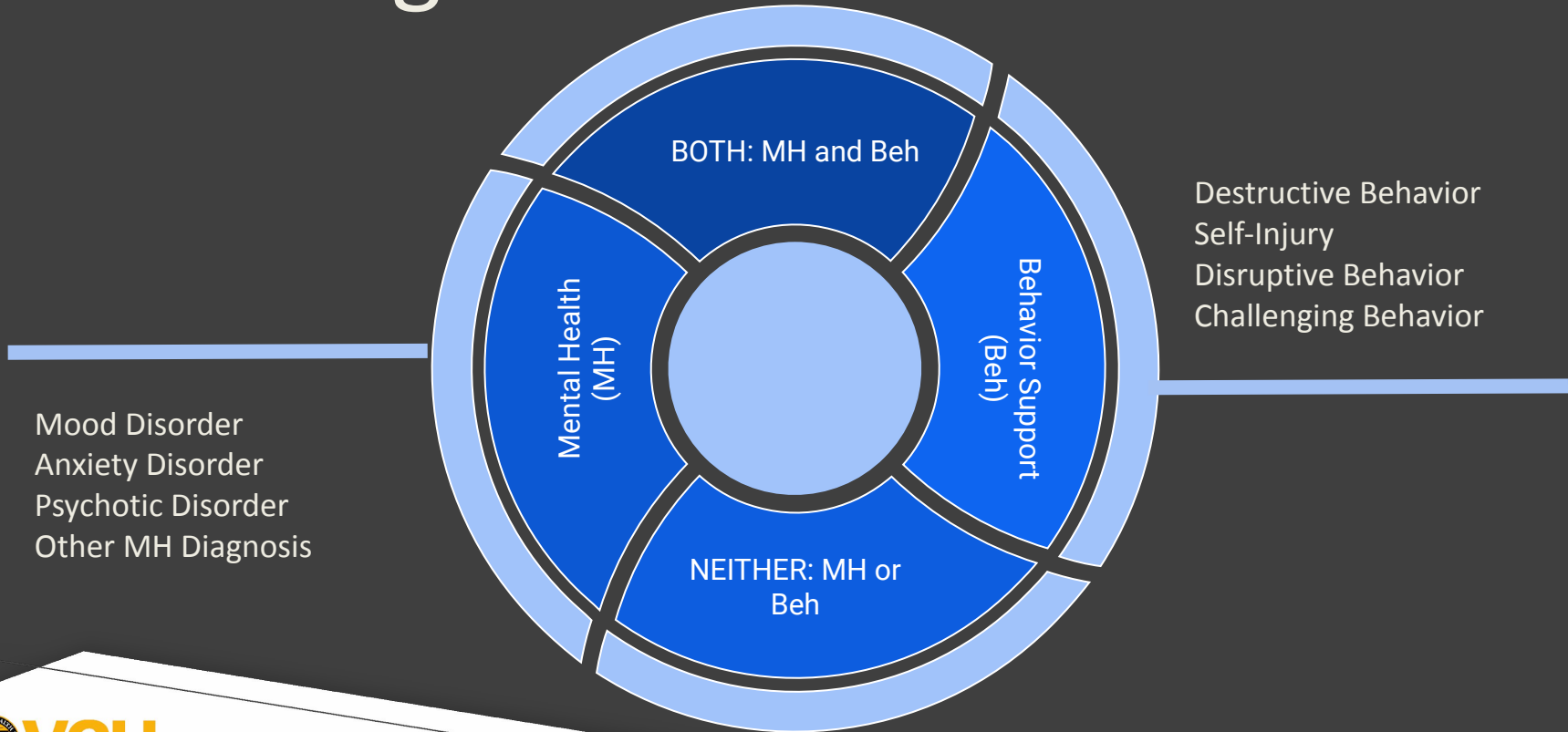
Destructive behavior: 31.73%

Externally directed, defiant behavior (destroying property, stealing, assaulting/injuring others)

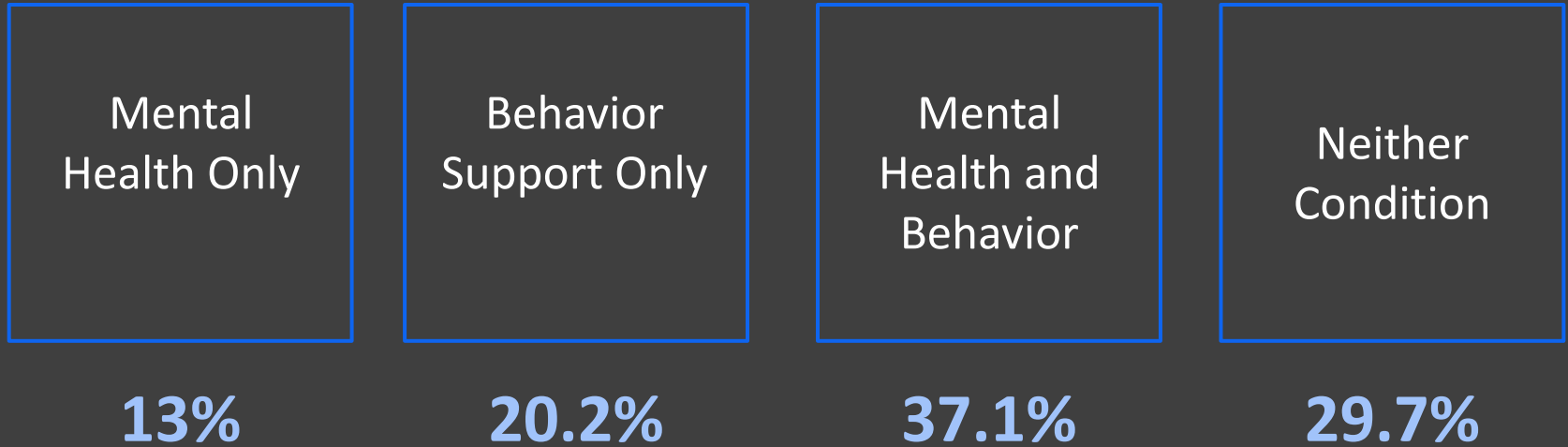
Disruptive behavior: 46.63%

Behavior that interferes with the activities of others (laughing or crying without apparent reasoning, yelling or screaming, cursing, threatening)

Our Categories



Mental Health Categories



Medication Use

54.2% took medication for a psychiatric disorder

28.4% took medication to manage behavior...

but only 20.3% had a behavior plan



Medication Use

Mental Health

For mental health condition:

85.6%

For behavior:

13%

Behavior

For mental health condition:

33.9%

For behavior:

36.4%

Both

For mental health condition:

89.9%

For behavior:

50.4%

None

For mental health condition:

9.85%

For behavior:

2.31%

Group Differences: Disability

Formal mental health diagnosis

Mild or moderate intellectual disability
Lower overall SIS-A scores
Verbal communication

Behavioral support needs only

Severe or profound intellectual disability
Autism

Group Differences: Behavior Plan

People with documented behavior support needs, with or without a mental health diagnosis, were more likely to have a behavior plan.

BUT people in both groups were more likely to take medication than to have a behavior plan

Reminder!

Personal Opportunity Outcomes

Rights

- Lock bedroom door
- Key to home

Choice

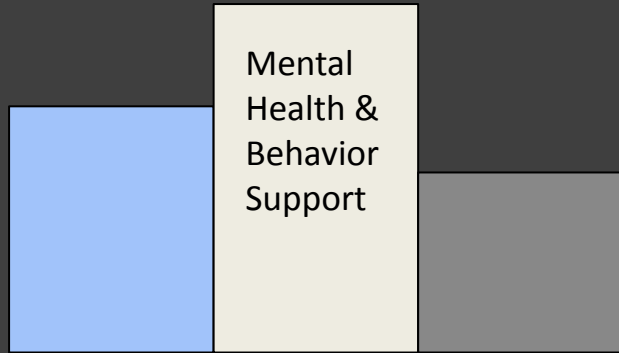
- Schedule
- Free time
- Spending money

Community Participation

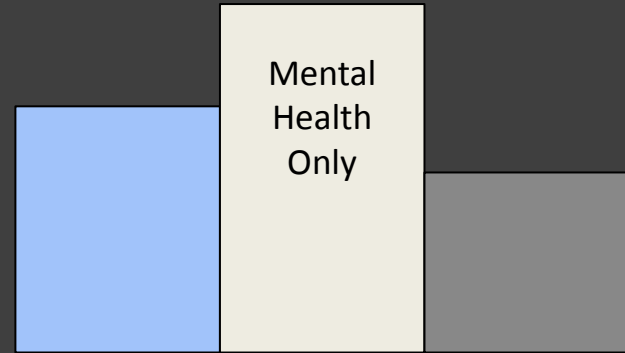
- Shopping
- Errands
- Eating out
- Entertainment

Personal Opportunities

Mental health and behavior support needs predicted personal opportunities.

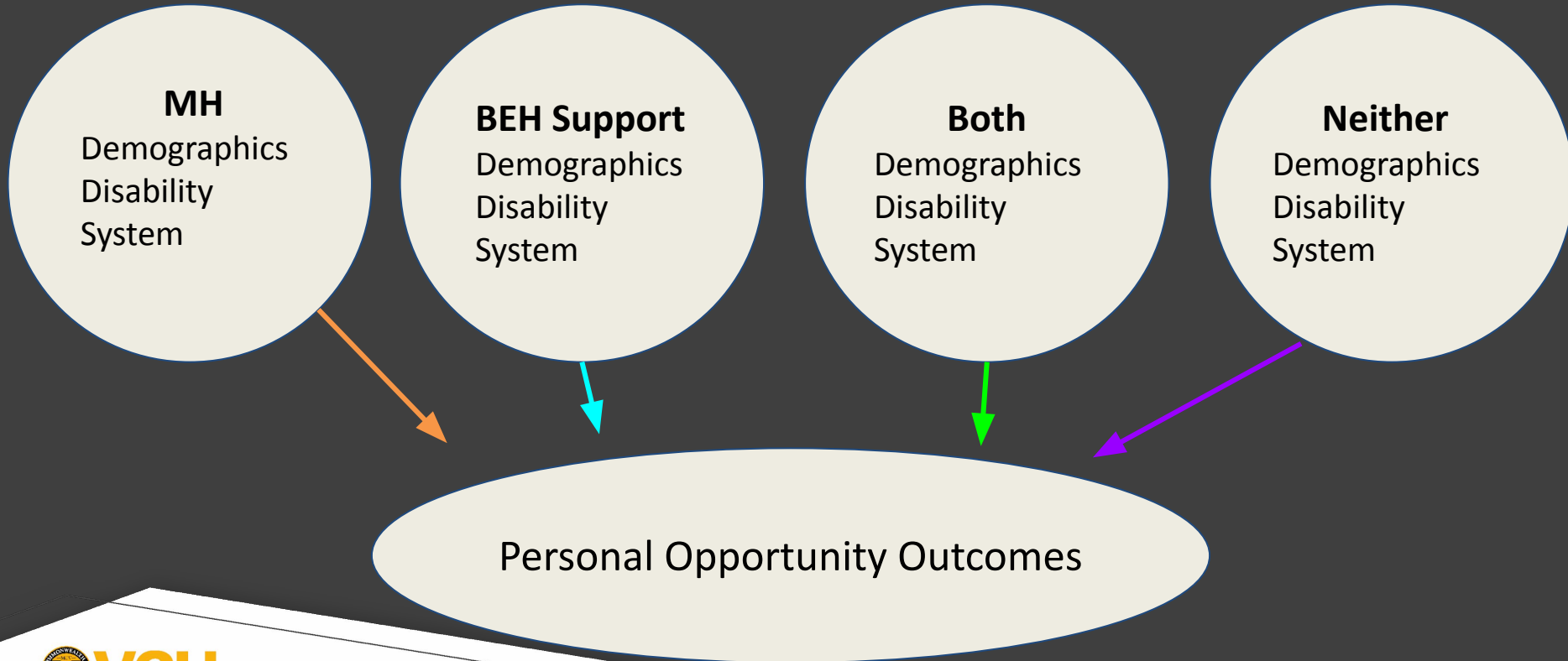


Community Participation



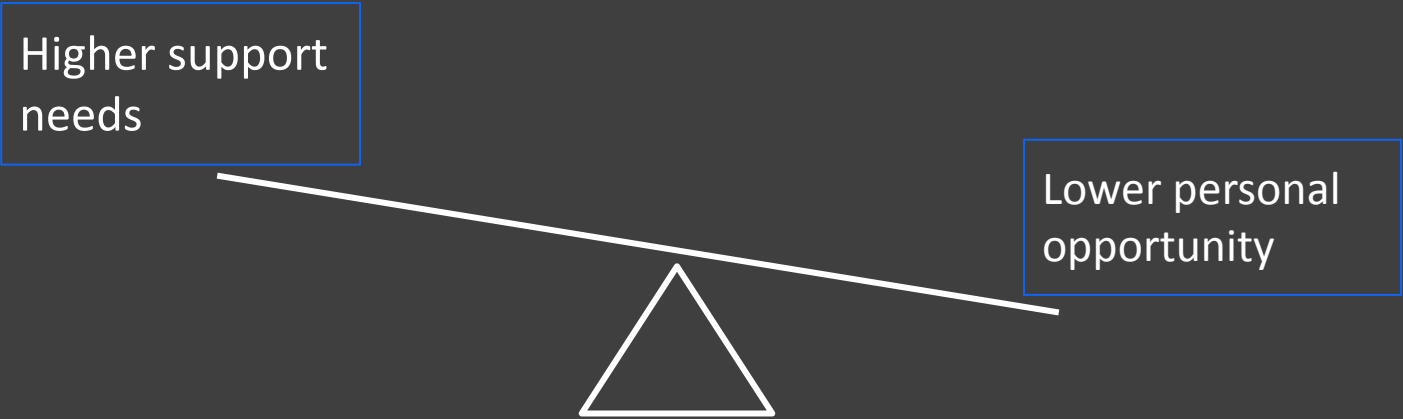
Rights and Choice

Personal Opportunities



Personal Opportunities

SIS-A was a **consistent** predictor of personal opportunities in all mental health groups.



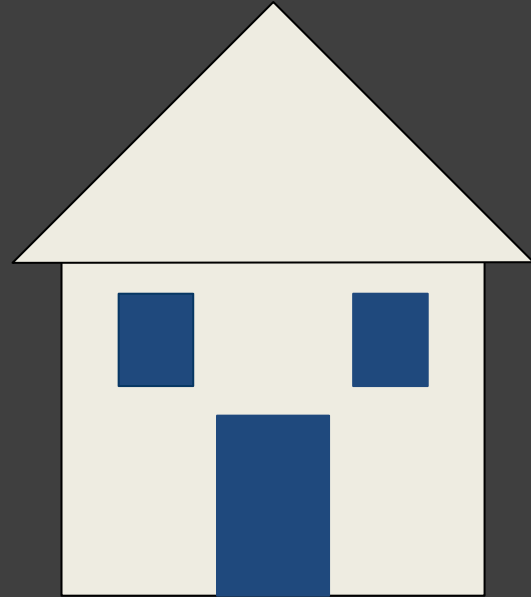
Higher support needs

Lower personal opportunity

Personal Opportunities

Impact of residence differed
between groups.

Living in host homes/sponsored
residential homes were most
beneficial for people with
behavior support needs.



Key Points

Formal assessments like the SIS-A can be useful in identifying people who need extra support

Rates of mental health conditions and behavioral support needs are high

- DSPs should be familiar with diagnoses, symptoms AND what they mean for the people they support

Key Points

Our research suggests that mental illness and behavioral challenges are related, but distinct

- Pharmacological interventions may not be appropriate for all people
- Support staff can help identify the needs and emotions underlying behaviors
- Individualized attention and support may explain the benefits of host homes for people with behavioral support needs

What can you do?

Work with trained clinicians and healthcare providers to explore alternatives to medication

When medication is appropriate, help people with IDD and the staff supporting them understand its purpose and effects

Make sure staff are trained in implementing and monitoring behavior plans

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Thanks to Our Team!

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