Clinical practices of psychologists working with intellectual disability and mental health: A national survey

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Literature Review

• Psychologists in mainstream MH settings and disability services can differ considerably in their clinical operations, roles and interactions with PWID (Munden & Perry, 2002).

• Scarcity of research in use of evidence-based practice in the field of ID (e.g. Burns & Ysseldyke, 2008)
Edwards, Lennox, & White, 2007 found:

- Australian psychiatrists felt poorly equipped to serve the MH needs of PWID.

- Psychiatrists acknowledged they treat PWID from a symptom based as opposed to diagnosis driven methodology.
Current Gaps with Research Literature

• No study conducted on psychologists working with MH needs of PWID

• Research in assessment models and practice guidelines in assessing MH in adults with ID is scarce

• Gap between research and practice on assessment practices in MH clinicians (Jensen-Doss & Hawley, 2010)
Study Aims:

• Examine current clinical practices in MH assessment

• Identify disparities in clinical competencies and workplace supports

• Identify training gaps
Method:

National survey completed by psychologists who work with PWID.

109 participated
Section One:
Demographic information, academic and professional experience in ID and nature of clinical contact with PWID

Section Two:
Statements of opinion on mental health service provision, current clinical training and perceived barriers of mental health service delivery and specific training needs
Section Three:

Current clinical practices of psychologists who provide assessment of mental health concerns in adults with intellectual disabilities.
Results: Demographic Characteristics

Frequency by State

- 1 NSW: 59%
- 8 Tas: 11%
- 6 SA: 6%
- 4 Qld: 6%
- 3 VIC: 7%
- 2 ACT: 2%
- 7 WA: 9%

Frequency by Highest Qualification

- Bachelors: 52%
- Masters: 39%
- Other higher: 9%
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<thead>
<tr>
<th></th>
<th>Range</th>
<th>$M$</th>
<th>$SD$</th>
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<tbody>
<tr>
<td>Years of psychological experience</td>
<td>0- 37</td>
<td>10.55</td>
<td>9.31</td>
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<tr>
<td>Years of experience with ID</td>
<td>0- 42</td>
<td>11.98</td>
<td>9.32</td>
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<tr>
<td>Years in current role</td>
<td>0- 35</td>
<td>6.45</td>
<td>6</td>
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Frequency by Work Setting

Gov dis: 50%
NGO: 20%
Private: 14%
Other: 11%
Health: 3%
Specialist: 2%
Clinical Competencies

- 11% agreed or strongly agreed that ‘Fourth year trained psychologists in mainstream MH services are qualified and skilled in MH ax in PWID’

- Similar found with psychologists from mainstream disability services
• 75% - more confident identifying MH symptoms compared with diagnosis

• 51% - adequate skills and training to assess and diagnose mental disorders

• 88% - clinical assessment guided by evidence-based practice
• No differences found between Gov. disability, NGO and private practice psychologists’ views on skills and training for MH ax.

• Significant differences found on perceptions of adequacy of resources in workplace to facilitate assessment and diagnosis of MH disorders in PWID
MH assessment

• Amongst 61 psychologists who conduct mental health assessments consider the role of mental health dx to lie with:

- Psychiatrists: 40%
- Generalist psychologists: 30%
- Clinical psychologists: 20%
- Collaboration btw psychologist and psychiatrist: 10%
The most likely profession psychologists collaborate with during MH assessments

- Psychiatrists: 92%
- Behaviour Support Practitioners: 90%
- GPs: 88%
- Psychologists: 74%
• Applying special considerations and modifying mainstream clinical practice common practice.
Training Requirements

86% (n=105) reported needing further training in MH and ID.
Common themes:

• Online access, workshops and conferences
• Assessment and treatment of MH conditions in PWID
• Specialised assessment tools
• Guidelines on assessment of MH in PWID.
Conclusion

• A larger proportion of psychologists consider MH dx in PWID to be the role of psychiatrists

• Applying special considerations and collaboration is common practice.
• Training specific to the needs of psychologists are needed to skill up the profession in MH and ID
Future Studies

• Assessing views and implementation of best practice in MH assessment

• Explore carers’ experiences and perceptions of psychologists and best practice
References


Thank you for your interest!

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