

Mental Health RECOMMENDATION Form

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Record ID

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ECHO Autism Mental Health

Recommendations Form

**Rachel Loftin, PhD; Alexander Westphal, MD, PhD;
Matt Waggoner, PLPC; Ellie Madigan, Family Advocate;
Lindsey Nebeker, Autistic Consultant**

Email our clinic coordinator **Brandy Dickey** at dickeyb@missouri.edu if you have any questions or comments.

PLEASE NOTE: Project ECHO case consultations do not create or otherwise establish a provider-patient relationship between any UMH clinician and any patient whose case is being presented in a Project ECHO setting.

ECHO ID: MH057

Presenting Clinician: Emily Wickstrom

Presentation Date: 2024-03-25

Presentation Type: New

Presenting Question:

* must provide value

How to support the client as she struggles with parenting issues? How to help the client better understand and accept her autism diagnosis? How to help client improve mood and self-esteem?

Additional Identified Concerns:

Some stressors at work, though it's also where she does well

After review of information provided and discussion of the case, the following recommendations are provided:

1)

The client feels good about herself at work, and it would be good to find other places where she is thriving and can feel good about herself.

Would she be open to trying a group? It may be helpful for her to have opportunities to meet other autistic people. Prosper Health has free monthly education groups, where she can learn more about the diagnosis and meet others.

https://docs.google.com/forms/d/e/1FAIpQLSecbtIBtpdPPjusgFR03f6oFoCe5NQSZRgJPV3hp32AXCSouQ/viewform?usp=sf_link

It sounds like some discussions about values have gone well. If you haven't already used it, an ACT values card sort activity can be helpful. There are some available online or you can easily print your own. (I should point out that elements of ACT are known to help people with anxiety and depression, there is not yet a good evidence base for these strategies in autism.)

Psychoeducation about sensory experience can be helpful to help the client understand how her sensory experiences contribute to her daily function. For instance, the yelling may have a bigger impact on her than is typical. No one likes to be yelled at, but she may experience overwhelmed in a more extreme way.

It may help to prepare scripts in advance for common parenting situations and rehearse them. When the time comes to reprimand her daughter, it may help to have the language and plan in mind.

Use collaborative problem-solving approaches, which have a great evidence base for children like the client's. The website I linked below or books on CPS may be helpful for the client to learn more, and even just conceptualizing conflicts with the daughter to help teach any missing skills and set her up for success. She can use these same concepts to think of how to support herself in situations. <https://drrossgreene.com/about-cps.htm>

Another area for psychoeducation: it may help to teach about negative attribution bias, as it relates to mood. That is, when she is depressed, she is likely to interpret neutral stimuli as negative. This related to the example in session when she inaccurately interpreted your expression. This is a good thing for her to be aware of, as it affects her cognitions.

Do you think she requires accommodations at work for noise and social engagement? If you write a letter that includes her diagnoses and make the recommendations, that may be sufficient to get some accommodations in place.

Continue using visual supports and consider assigning writing prompts between sessions.

2)

Family Dynamics

Provide continued support in identifying boundaries and embracing the client's parenting style, even if it differs from her own upbringing.

Help her feel safe expressing disagreements with others, especially with her mother and grandmother.

Encourage her to continue practicing initiating conversations when standing up for herself.

Networking

Help the client look into if there are other resources, she can connect to for respite care (for her kids), so she does not only have to depend on her mother and grandmother to look after the kids.

Encourage networking opportunities with groups and communities, both in person and online, where she can relate to others, including other autistic parents.

Identity

Acknowledge the work done in expanding the client's knowledge of the autism spectrum's diversity and continue these discussions with her.

Recognize that the journey to self-acceptance and compassion varies for each person. For the client, it sounds like a gradual process, and being patient in the process will be beneficial as she continues on that journey.

3)

This was an excellent and interesting case. I am concerned about significant depression, whatever its relationship with autism. I am also concerned about the role that trauma may be playing in the amplification of her symptoms, including depression. I think that the overarching picture has enough pieces to make me worry about the depth of her depression and negative self-image. Some of her symptoms she describes, while probably reflecting autism, may also be generated by depression. Depression can really interfere with one's capacity to think and to process information - something which can play out in increased latency of responses. This creates an effect which looks like a social issue and feels like a social issue but has a treatable. I think a good psychiatry consult, and perhaps some psychological testing, or if these are not accessible, a conversation with her primary care about the possibility of med treatment could help.

4)

5)

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Empty rectangular box for answer 10)

11)

12)

The following toolkits/resources may be helpful:

General ASD Information

- Learn the Signs Act Early
- What is Autism Toolkit
- Parents Guide to Autism
- G. Parents Guide to Autism ATN
- 100 Day Kit
- The mental health guide for autistic college students: https://www.vanderbilt.edu/autismandinnovation/wp-content/blogs.dir/2498/files/sites/342/2022/06/College_Mental_Health_Guide_-_Full_graphics.pdf
- For autistic women: <https://www.vanderbilt.edu/autismandinnovation/for-autistic-women/>
- Autistic fatigue/burnout: <https://www.autism.org.uk/advice-and-guidance/topics/mental-health/autistic-fatigue/autistic-adults>
- Reading list: <https://www.autism.org.uk/advice-and-guidance/topics/mental-health/autistic-fatigue/autistic-adults>
- Intro to Neurodiversity Autism Perspective: <https://neuroclastic.com/autism-101-resources-from-the-autistic-community/>
- Masking: <https://neuroclastic.com/masking-and-mental-health-implications/>

Medical

- Constipation Toolkit ATN
- Dental Guide
- Feeding Toolkit
- Sleep Toolkit
- Sleep Toolkit for Teens
- Toilet Training Guide

Medications

- Melatonin Toolkit
- Medication Decision Aid
- Safe Medication Toolkit

Behavior

- ADHD Toolkit
- Anxiety Toolkit
- Applied Behavior Analysis Guide
- Behavior Guide
- Challenging Behaviors Toolkit
- Haircutting Toolkit
- Pica Toolkit
- Visual Supports

Adolescent/Transition

- Healthy Bodies for Boys
- Healthy Bodies for Girls
- Puberty/Adolescent Toolkit

Safety

- Big Red Safety Toolkit

Websites

- Autism Navigator - www.autismnavigator.com
- Essentials for Parenting Toddlers and Preschoolers - <https://www.cdc.gov/parents/essentials/videos/index.html>
- OCALI - www.ocali.org

Additional comments and recommendations:

Emily, it sounds like you've done a great job helping her get a handle on her mood symptoms!

We recommend that you present this case again in:

if you see any change or have new questions

Signature: *Rachel Loftin PhD.*

Date:

03-26-2024

M-D-Y

Form Status

Complete?

Complete ▼