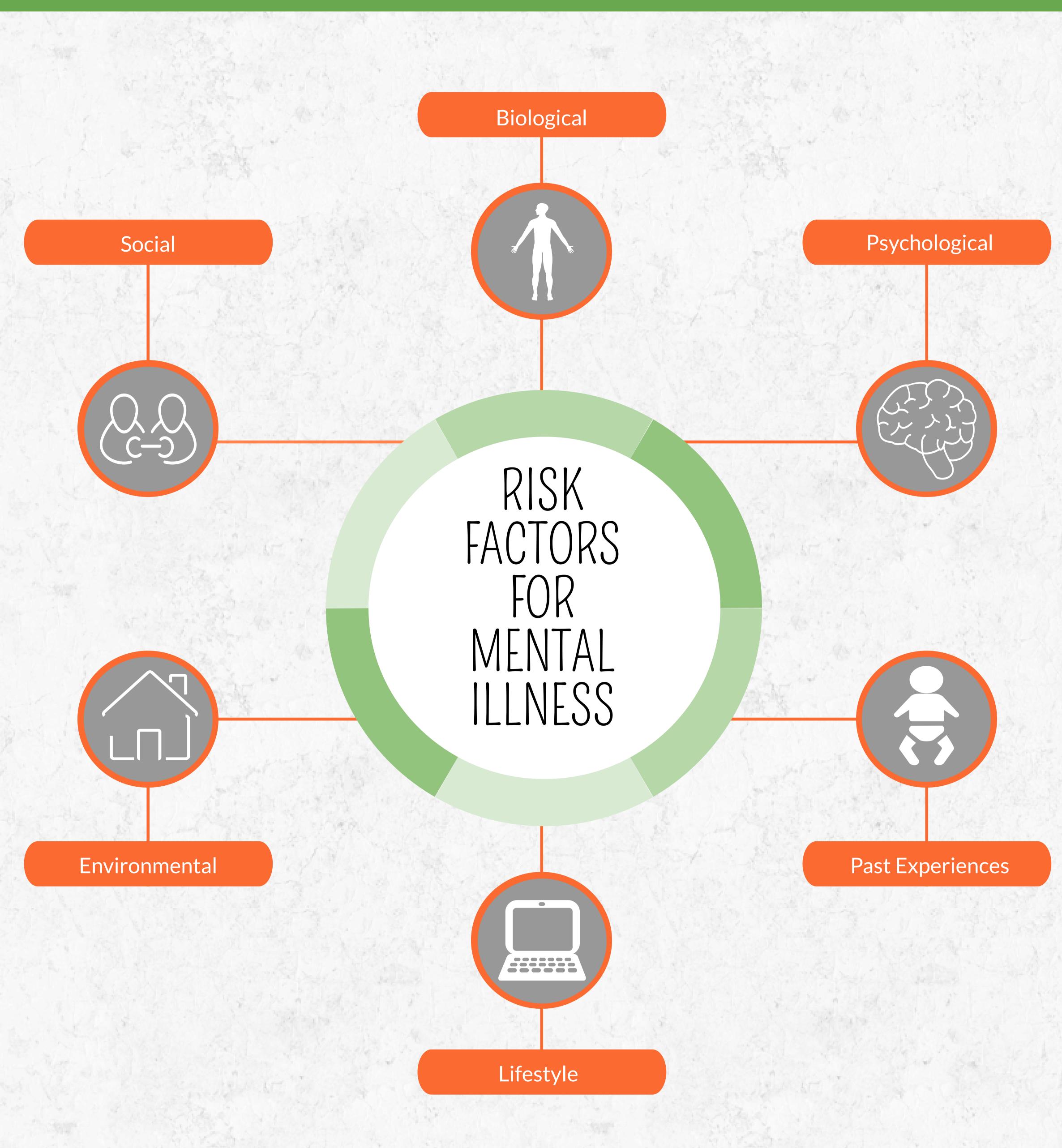
RISK FACTORS FOR MENTAL ILLNESS IN PEOPLE WITH INTELLECTUAL DISABILITY - MODULE 3







DEPARTMENT OF DEVELOPMENTAL DISABILITY NEUROPSYCHIATRY

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Biological

- A person's genes can increase the risk of a mental illness in people with an ID just as it can in people without an ID. In addition, some ID's with a genetic cause may further increase the risk of particular mental illnesses. For example, a person with Down syndrome has an increased risk of experiencing dementia.
- Some IDs are associated with brain changes that can increase the risk of a mental illness. For example, people with ID are more likely to experience dementia and at an earlier age than people without an ID.
- People with an ID are more likely to have vision or hearing difficulties. This can provide additional challenges and feelings of vulnerability.
- People with an ID are more likely to have physical disabilities (these may be part of the ID or in addition to). This can cause concern and difficulties in carrying out daily tasks. It can also limit the activities the person is able to take part in.
- Pain and illness are likely to have a greater impact on people with an ID. This is due to a reduced ability to describe their physical symptoms and therefore experiencing pain and illness for longer before receiving treatment. Feeling physically unwell and worrying about health can affect mental health.
- Medications and side effects can affect a person's mental health. People with an ID are more likely than people without an ID to take medications. They may also be taking a number of different medications. Some side effects may be mistaken for symptoms of a mental illness (e.g. tiredness or weight loss/gain). If unsure it is best to check with the person's GP (or prescriber).

Psychological

- Low self-esteem or lack of confidence in abilities (feeling "not good enough") can affect a person's mental health. People with an ID may not have been supported in the past to recognise their abilities and feel 'different' to people without an ID.
- Some mental illnesses may be linked to poor coping strategies. Coping strategies require cognitive skills (for example, reasoning, putting things into perspective, problem solving, planning for future events) and finding healthy ways to overcome stressful situations (such as relaxing or talking to someone). People with an ID may have a reduced ability to use the cognitive skills required.
- People with an ID are more likely to have experienced negative life events (e.g. abuse) but may not have received support.
- Some people with an ID have difficulty understanding and labelling their emotions.
- People with an ID may have difficulty processing different kinds of stimulus. Loud sounds and visual material
 may lead to feeling overwhelmed and anxious.
- People with an ID may have a reduced ability to understand changes to routines and surroundings which may cause distress.







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Past Experiences

- People with ID are more vulnerable to bullying, neglect & abuse (increased risk of being a victim) and may have experienced this in past. People with an ID who have experienced abuse in the past may not have been able to report it.
- Due to reduced cognitive abilities, people with an ID may not be able to express and manage feelings of grief. They may have difficulty coming to terms with a person dying or understanding the permanent aspect of death.
- There is a greater likelihood of experiencing unwanted life changes (such as moving to residential care rather than living independently) for people with an ID. Many people with an ID lack control over their major life decisions.

Lifestyle

- People with an ID are more likely to be underweight or obese. This can affect other areas of health and wellbeing.
- People with an ID are less likely to do the recommended amount of exercise than people without an ID.
 Research has shown only 17% to 33% of people with an ID engage in the recommended amount of physical activity. Physical disabilities may limit the types of exercise a person can do, however doing very little exercise can affect mood and make a person feel low in energy. Exercising is also a good way to relieve stress.
- Difficulties sleeping can affect mental health (such as difficulty falling asleep, staying asleep, or waking too early). There is research to suggest intellectual disabilities can be related to sleep problems.
- People with an ID are more likely to have contact with the criminal justice system or previously had an episode in custody. Their support needs may not be met in this environment.
- People with an ID are likely to experience greater effects from using drugs or alcohol. For example, people with an ID may experience greater sedative effects or if the person has mobility difficulties these could be worsened by drugs and alcohol. This may be due to different brain functioning or it may be due to interactions with medications.





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Environmental

- Living conditions may have a negative effect on mental health. For example, the person may not have access to the level of support they need, the accommodation may not be designed to be accessible for people with physical disabilities or other resident's (in group residences) behaviour may be distressing. Not having the freedom to choose where to live or with whom could also affect mental wellbeing.
- Lower socioeconomic status (income) is related to a greater risk of mental ill-health. This can be related to money worries, relationship problems, reduced access to healthcare, reduced access to leisure activities, reduced education and work opportunities, living in areas with a higher crime rate etc. People with an ID are more likely to have a low income than people without an ID.
- People with ID are more likely to experience financial difficulties. This is due to fewer employment opportunities and possible high healthcare costs
- Support staff and organisation policies may not support good mental health (for example, if choice and decision making are limited). Including people with ID in service planning and recruitment can help to give a sense of belonging and control.

Social

- People with an ID may have reduced opportunities to take part in social activities. This can lead to feeling isolated.
- People with an ID are likely to experience stigma. For example, others may treat a person with an ID as though they are of less value than others or should not be associated with.
- Some people with an ID may have a reduced ability to verbally communicate with others which can make interactions difficult.
- Fewer opportunities to have a meaningful job or role can mean not having a sense of purpose or belonging.
- People with an ID may have fewer family and friends to act as a support network by listening and understanding their concerns and difficulties.
- An atypical appearance (which may be associated with some IDs) may mean receiving unwanted attention in social situations or people may avoid them.





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