

Mental Health in Postsecondary Education: What is it like for students with Autism Spectrum Disorder and what does the research say?

Rashmeen Nirmal, Ph.D., R.Psych.

Clinical Instructor, UBC Department of Pediatrics, Faculty of Medicine
Qualified Specialist, British Columbia Autism Assessment Network



a place of mind

Scope of the Session

- Review factors affecting postsecondary educational functioning for students with ASD
- Present a section of my doctoral dissertation results investigating the lived experiences of students with ASD attending college or university
- Discuss implications and recommendations for best practice, including future research

*pseudonyms are used in this presentation to protect the anonymity and confidentiality of the research participants

Background Information

- Increase in diagnosis (1 in 68 children)
- More children are being identified with ASD without significant cognitive impairment
- Research has shown that the deficits with ASD persist into adulthood
- A recent epidemiological study has shown the prevalence rate of adults with ASD to be 1%

(APA, 2013, Brugha et al., 2011; CDC, 2014; Honda, Shimizu, Imai, & Nitto, 2005, Howlin, Goode, Hutton, & Rutter, 2004)

Postsecondary Aspirations

- Increase in enrollment of students with ASD in postsecondary education
- Students with ASD have aspirations of attending college or university
- Poor postsecondary educational outcomes
 - Lower enrollment rates compared to other disabilities
 - Higher risk of no enrollment
 - Higher risk of dropping-out soon after entry

(e.g., Camarena & Sarigiani, 2009; Fombonne, 2005; Hurewitz & Berger, 2008; Nevill & White, 2011; Shattuck et al., 2012; VanBergeijk et al., 2008)

(Nirmal, 2017)

Factors affecting Postsecondary Educational Functioning for Students with ASD

- Social Interaction and Communication
 - Romantic relationships
- Restricted and Repetitive Behaviours
 - Sensory dysregulation
- Adaptive Behaviour Functioning
 - Independent daily living skills
 - Adaptive behaviour is often not commensurate with cognitive functioning in ASD

Factors affecting Postsecondary Functioning for Students with ASD

- Academic Functioning
 - Executive functioning – managing multiple task demands
 - Accessing educational accommodations
 - Disability documentation
- Self-Advocacy Skills
- **Psychiatric Comorbidity/Mental Health**
 - Higher rates of psychiatric conditions than the general population and compared to individuals with ASD + cognitive impairment (Howlin & Moss, 2012; Ghaziuddin et al., 2002; Joshi et al., 2013)
 - Prevalence rates vary based on the studies; up to 70% may have 1 co-occurring condition and 40% may have 2 or more co-occurring conditions (APA, 2013)

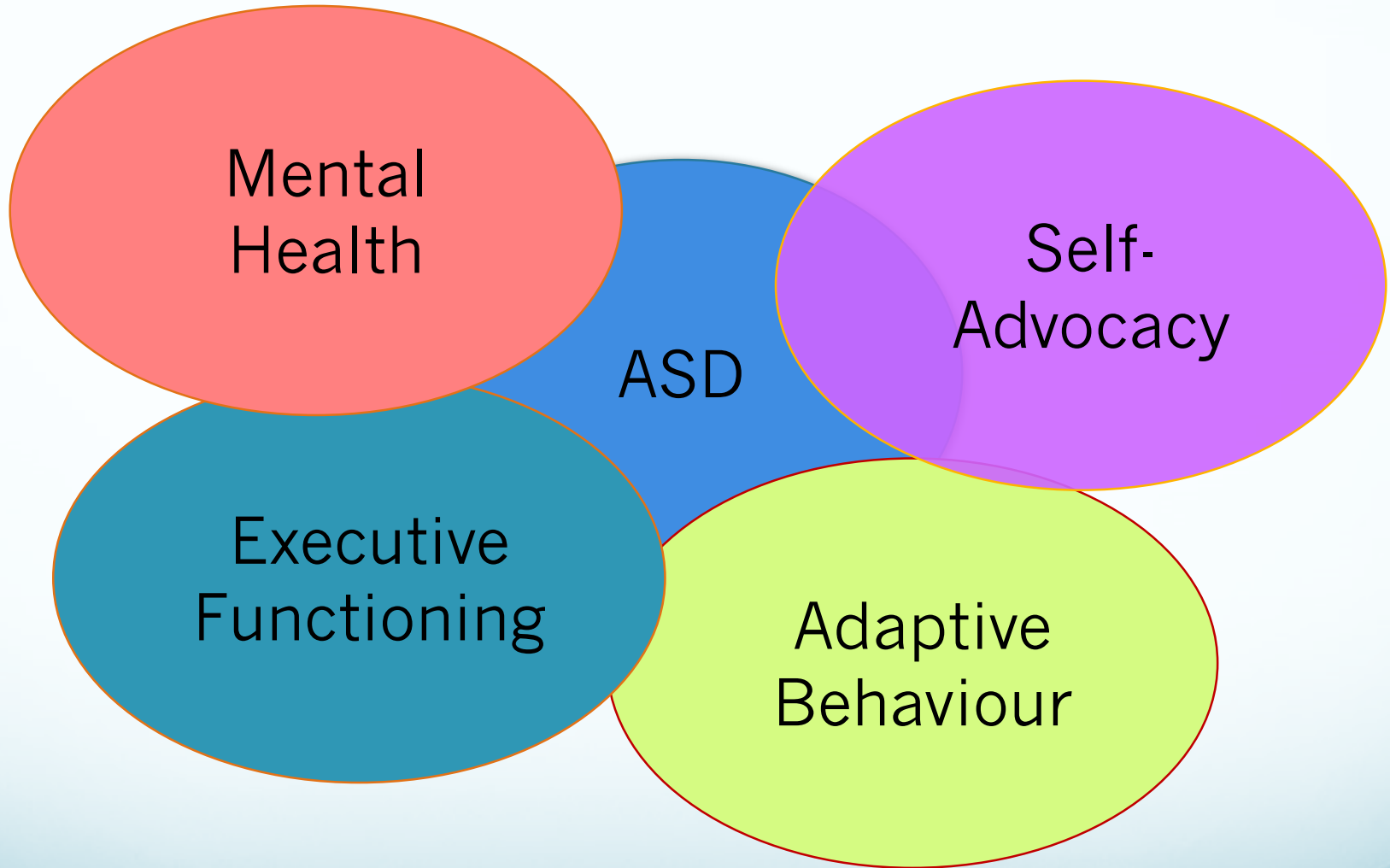
Psychiatric Comorbidity

- Anxiety and mood disorders are the most common co-occurring conditions in adults (Howlin & Moss, 2012; Sterling et al., 2012)
- Adults with ASD are more likely to be prescribed one or more psychotropic medications (e.g., Esbensen et al., 2009; Tsakanikos et al., 2006)
- Little is known, empirically, about mental health functioning in students with ASD attending college or university

Psychiatric Comorbidity

- In postsecondary education, factors that may lead to onset or exacerbation of symptoms include:
 - Changes in environment
 - Coping with academic and social demands
 - Independent living challenges
 - Environmental stressors (e.g., sensory dysregulation)
 - Student Union Buildings
 - Residence Halls
 - Cafeterias

(e.g., Klin, McPartland, & Volkmar, 2005; VanBergeijk et al., 2008; VanBergeijk & Shatyermman, 2005)



ASD Functional Impact

(Nirmal, 2017)

Need for Research

- There is a paucity of research in the area of students with ASD in postsecondary education
- Understanding the experiences of these students may provide valuable insight into their functioning in this context
- Research is needed to support effective transition and postsecondary programming

(e.g., Camerana & Sarigiani, 2009; Fombonne, 2012; Gelbar et al., 2014; Howlin & Moss, 2012; Welkowitz & Baker, 2005)

(Nirmal, 2017)

Research Method

- Research question:
 - *What is the meaning of the lived experiences for students with ASD attending college or university?*
- Interpretive Phenomenological Analysis (IPA; Smith, Flowers, & Larkin, 2009)
 - Examines the meaning of personal and social experiences
 - Participants are viewed as experts
 - The researcher plays an active role in interpretation
 - Concerned with transferability not generalizability of the research findings

(Nirmal, 2017)

Participants

- 12 students diagnosed with either high-functioning autism or Asperger's Disorder (9 males, 3 females)
- All participants were enrolled in either college or university (represented 5 institutions)
- Undergraduate students (years 1-3) and one graduate student
- Age range 18-28

Procedures

- Data Collection
 - In-depth, individual, semi-structured interviews (mean length = 75 minutes)
 - Flexible, in-depth discourse
 - Follow-up Interview (ranged from 30-45 minutes)
 - Opportunity for the participants to ask questions
 - Clarify or share additional thoughts
 - Member-checking (a validation strategy)

Procedures

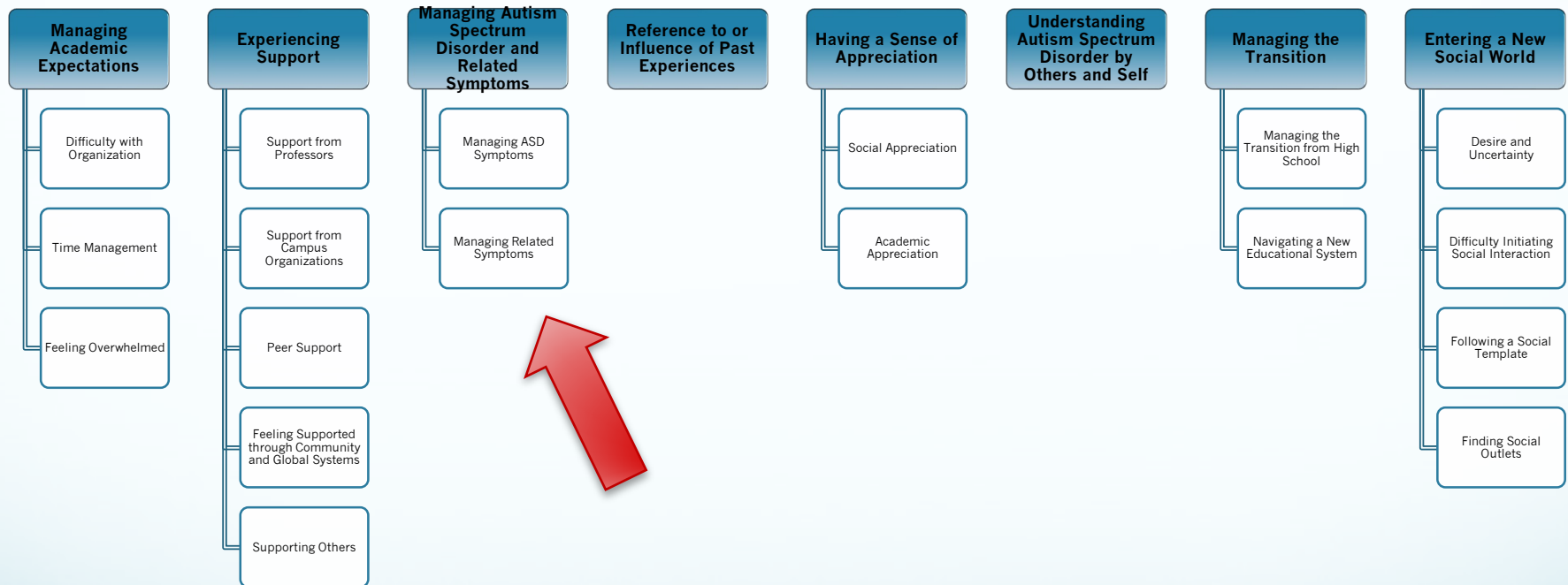
- Smith, Flowers, & Larkin (2009) IPA Data Analysis
 - Transcripts were analyzed case-by-case, starting with the first interview
 - Researcher takes an active role in interpretation
 - Each analyzed transcript informed the analysis of subsequent transcripts

Procedures

Ensuring Scientific Rigour and Credibility of the Research Findings (Creswell, 2009)

- Researcher Reflexivity
- Peer Reviewer
- Member Checking
- Thick and Rich Description
- External Auditor

Research Findings: Broad Themes and Subthemes



A Focus on Theme 3: Managing Autism Spectrum Disorder and Related Symptoms

- Managing ASD Symptoms
 - Advantages and disadvantages of restricted interests
 - Sensory dysregulation
- Managing Related Symptoms
 - Academic difficulties exacerbated symptoms of depression, ADHD, OCD, and anxiety symptoms, and vice versa
 - Anxiety and depression were very common threads
 - Affected attendance and severity of symptoms

*“...Aspies, are kind of, you know, **regular specialists**. We tend to fixate on subjects and when we do that, we tend to excel. Because our minds are so fixed to that and we just go at it. So we’re able to, if you give us a subject to work in, **we tend to do really well...**”*

“I can definitely get caught up in things like playing videogames or such because it is something that interests me more” (rather than completing his homework)

“...as an Aspie, I have a very sensitive nose, I smell things very easily and I hear things very sharply so partying may not be the best choice but that’s where you meet people...”

“...when I smell things it’s like magnified. I can trace things back to their source with their smell sometimes...like people would always smoke below the building floor [in dorms] and I would smell it in my room and I would go like: Ugh, oh man! And when I smell cigar-students who’ve just finished smoking...in class I go like: ahhh quite overwhelming.”

“In a room with a hundred people, every shuffle movement I can hear, like every scratch of a pencil” -causing her to focus on the background noise rather than the lecture

“I was making little gains in both academic and in personal development, and having terrible mood swings all the while. And it got to the point this year where I was going: I don’t deserve to go through life hating myself and wanting to die. I don’t deserve to put myself through agony in order to try and reach my goals. I don’t deserve the pain I put myself through and how hard I am on myself...which is sort of why I’m taking a break [from school].”

(Nirmal, 2017)

“First term I was heavily depressed...a few um people approached me and I turned them away, I gave them a stare I would normally use to defend myself against bullies...I would be very withdrawn and not try very hard and be very indulgent...like repetitive videos...I knew that I was very pointless playing video games...not caring much about my hygiene...I guess I would still take a shower every day but I’d leave things lying around...I guess my room in a way, it sort of reflected my mental state...”

(Nirmal, 2017)

“...I’m very, very, very anxious, um, you know...very awake, very clenched...constantly repeating the information over and over and over again. Constantly looking at the book, just constantly re-reading lines. Um constantly re-reading lines and if I don’t understand them, getting very frustrated. I will, you know, start speaking them out loud over and over again to try and encode it...”

“I’m anxious about getting into the (study) groups because usually they’re sort of, you know, small social groups already and I’m coming into them. And I know that my behavior can sometimes be a bit odd, so I don’t want to distract from that”

(Nirmal, 2017)

“...I took first year chemistry and the lab really stressed me out. Just ‘cos you’re doing all this accurate measurements and stuff and familiarizing yourself with the environment. That was really hard on me. Like, I’d be, I’d be stressed reading, reading over procedures for like four hours or something before a lab and really, it was just me stressing out more than anything. But in terms of anxiety, well, my brain, my brain gets, my thinking gets a little clouded. I have a tight, feel tight in the chest. And it usually happens when I’m, when I’m having a really hard time understanding a concept or I haven’t completed my homework on time”

(Nirmal, 2017)

“...chemistry, like I said, lab really stressed me out just ‘cos there was so much to adapt to and it kind of comes to the part about me not feeling I’m meeting up to the expectations and hurting myself because of that. But the reason I dropped chemistry was I got insomnia. I couldn’t sleep for five nights. So that really was not fun...”

“Um, I have insomnia and it basically comes from, in fact I’m pretty sure it just ties back to the autism in the end. Because when I sleep I can’t shut my brain off. And I tend to ruminate and dwell on everything that’s ever happened whenever I try to sleep. Good or bad like, like not picking right side dish at a restaurant will cause me to lose sleep so it’s just stupid things like that. And so the rumination kind of kills me. Which probably contributes to a lot of things... like my memory’s not good but it would be better if I could sleep eight hours a day instead of four”

“Yeah, depression. Depression, of course. Like it took me maybe a month before I was sleeping properly without wor-..., without worries or anything. Because it took a little while, of course, to get kind of comfortable sleeping again, perfectly...”

(Nirmal, 2017)

Implications for Practice

- Understanding the co-occurrence of mental health conditions in ASD
 - Minimize **diagnostic overshadowing**
- Knowledge and capacity building
 - Recognize signs and symptoms of mental health issues in ASD
- Training for service providers; understanding the unique treatment needs of individuals with ASD
 - School teams
 - Community mental health teams
 - College/University counseling services

Implications for Practice

- Think **contextually and ecologically** to prevent or minimize mental health issues in ASD
 - Social Skills
 - Adaptive Behaviour (including work placements)
 - Executive Functioning
 - Environmental Modifications
- Intervention/Treatment Implementation – *think prevention and intervention at any age*
- Collaboration with school, home, health and community professionals

Implications for Practice

- Transition Support
 - Capacity building for community service providers and school staff
 - Self-Advocacy (e.g., IEP meetings, transition portfolios)
 - School- and community-based transition planning- a team approach
- Postsecondary programming and support
 - Disability awareness (e.g., professional workshops)
 - Peer mentorship programs
 - Social skills intervention (including employment training)
 - Counseling services
- Policy development and program evaluations

Recommendations for Future Research

- Mental health functioning of postsecondary students with ASD
- Executive functioning in college or university students with ASD
- Experiences of 4th year students and graduate students
- Experiences of postsecondary educators (e.g., disability advisors, counselors, professors) and community service providers

“Thank you for doing this research because they forget about us after high school”

- Zach (participant)

Contact Information

Rashmeen Nirmal, Ph.D., R.Psych.

Email 1: dr.rashmeen.nirmal@gmail.com

Email 2: rashmeen.nirmal@cw.bc.ca