



Things to examine when considering mental health treatment for TAY with co-occurring intellectual disabilities

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**General Definition of Intellectual Disability**

As defined by the LA County DMH, Intellectual Disability includes impairments of general mental abilities that impact adaptive functioning in three domains. These domains determine how well an individual copes with everyday tasks. The 3 domains are Conceptual; Social and Practical.

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3

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### Who are transitional age youth?

The Accepted definition, including that used by the Los Angeles County Department of Mental Health, Transitional Age Youth are youth age 16 to 25. However, transitional age youth can encompass any age when a person has the desire to move forward into the next phase of their life, particularly marking the transition from adolescence and adulthood.

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4

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What are some of the challenges facing transitional age youth with a co-occurring intellectual disability?

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5

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**Independence**

**Social Competence**

**Bullying**

**Interpersonal Relationships-  
Friendships**



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Sexuality – Safe Sex Practices

Career interests/Meaningful use of time

Educational Opportunities

Financial Security



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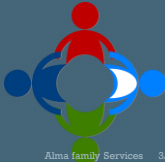
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Family

Substance use / experimentation

The role of social media – Internet Safety

Community Integration



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8

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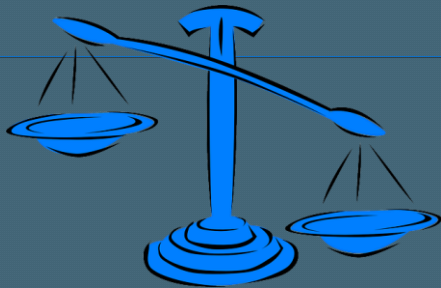
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How do we find the balance

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### Types of Behaviors or Clues

- Overwhelming fear or terror
- Change in ability to cope
- Change in behavior

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### Types of Behaviors or Clues

- Decreased ability to handle stressful situations
- Increase in maladaptive behavior
- New onset/increase in self-injurious behavior

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### Types of Behaviors or Clues

Change in mood

Loss of motivation

Inability to express emotions

Extreme overreaction to small things



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13

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### Types of Behaviors or Clues

Extremely low self-esteem

Suicidal thoughts

Change in energy or sleep patterns

Use of or abuse of alcohol or drugs

Extreme changes in appetite

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14

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### Types of Behaviors or Clues

More or Less:

Level of activity

Irritability

Confusion

Disorientation

Lethargy

Withdrawal



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15

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**Project HOPE Observation Form #1**  
 Please complete and bring to your appointment with the mental health provider.  
 This form can be downloaded at [www.projecthope.org](http://www.projecthope.org)

Your Name: \_\_\_\_\_  
(person completing form)

Person You Observed: \_\_\_\_\_

Relationship to Person: \_\_\_\_\_

Preferred Language: \_\_\_\_\_

**Changes in Activity/Behavior**  
 What changes have you observed? Include how often and how long.

... Sleeping routine \_\_\_\_\_

... Eating habits \_\_\_\_\_

... Appearance \_\_\_\_\_

... Mood \_\_\_\_\_

... Socialization \_\_\_\_\_

... Activities \_\_\_\_\_

... Other (Describe) \_\_\_\_\_

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**Notes and Other**  
 Describe the person, before the changes identified on page one, but what is happening now.

1. What were they like before recent changes? \_\_\_\_\_

2. What are they doing or communicating that appears different? \_\_\_\_\_

3. What may have caused the changes in an activity or behavior? \_\_\_\_\_

Has this happened before? Yes No

4. Is there a specific time (daily, weekly, monthly, yearly) when changes are noticed in activity or behavior? \_\_\_\_\_

5. Is the change directed toward a specific person? Yes No

Who: \_\_\_\_\_

Relationship: \_\_\_\_\_

I have helped my caregiver fill out this observation form. We have reviewed the information together.

It is OK for my caregiver to share the information with my mental health provider if they want to at the meeting.

Name: \_\_\_\_\_ Date: \_\_\_\_\_

PROJECT HOPE: This project and form are funded by the Mental Health Services Act (MHSAs) in partnership with the California Department of Mental Health and Department of Developmental Services (DDS).

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“The behaviors that are negatively impacting relationships, living situation or another pertinent aspect of the individual’s life can warrant a mental health evaluation”

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## Mental Health

- According to the DSM-5, the prevalence of mental disorders in people with the intellectual disabilities is 3 to 4 times higher than in the general population.
- Co-occurring intellectual disabilities is a risk factor for developing a variety of mental disorders and may affect clinical presentation.
- Individuals with co-occurring intellectual disabilities are at greater risk for abuse and exploitation than the general population.

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## Mental Health

- Families of TAY with CID looking for mental health treatment should be aware that "The presence of an intellectual disability should never be the sole exclusionary criterion for treatment of co-occurring mental disorder that meets medical necessity criteria for treatment in specialty mental health systems."
- The treating therapist, or treatment team should request and review as many records (e.g. IPP, IEP, CDER, Psychological, Medical) from the referred individual's Service Coordinator at Regional Center as possible to assist them in completing a thorough mental health assessment.

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## Mental Health

- Ensure information is gathered from multiple informants (e.g. teachers, doctors, family members) and brought to the attention of the treatment team
- It is important that family members advocate for necessary services-this may mean applying multiple times, or appealing denials for services

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### Possible myths within the mental health provider community

- TAY with an ID will not benefit from mental health treatment
- A non-verbal TAY individual with an ID will not benefit from mental health treatment
- The mental health needs of a TAY individual with an ID should be served by the Regional Center system

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25

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### Rule Outs to Consider

- Medical Causes
- Hormonal
- Dental
- Physical Pain or Discomfort

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26

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You  
Are the  
expert

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27

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## Types of Services

- Therapy (Individual, Group or Family)
- Applied Behavior Analysis
- Psycho-educational Groups
  - Social Skills
  - Anger Management
  - Substance Abuse

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28

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- School based Services / Special Education
- Residential Treatment / Group Homes
- Medication Management / Psychiatry
  - MDs , RNs, PTs, Case Managers
- Case Management
- Support Groups (Client or Family)
- Emergency Services
- Hospitalization

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29

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## Securing Mental Health Services

- Call Regional Center for recommendations and assistance with making referrals
- Call DMH - Department of Mental Health
- Call treatment facilities or mental health agencies in your area

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30

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## FOCUS ON THE MENTAL HEALTH

- FOCUS ON THE BEHAVIORS
- FOCUS ON THE SYMPTOMS
- FOCUS ON THE PATTERNS
- FOCUS ON YOUR CONCERNS

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31

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## Questions & Answers

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