Research in Developmental Disabilities 31 (2010) 362–366

Contents lists available at ScienceDirect

Research in Developmental Disabilities

journal homepage:

Challenging behavior and co-morbid psychopathology in adults with intellectual disability and autism spectrum disorders

Jane McCarthy [a], Colin Hemmings [a], Eugenia Kravariti [b], Katharina Dworzynski [c], Geraldine Holt [a], Nick Bouras [a], Elias Tsakanikos [a,*]

[a] Estia Centre, Institute of Psychiatry, King's College London, UK
[b] NIHR Biomedical Research Centre, Institute of Psychiatry, King's College London, UK
[c] Child and Adolescent Psychiatry, Institute of Psychiatry, King's College London, UK

ARTICLE INFO

Article history:
Received 23 September 2009
Accepted 1 October 2009

Keywords:
Autism spectrum disorders
Pervasive developmental disorder
Challenging behavior
Intellectual disabilities
Psychopathology

ABSTRACT

We investigated the relationship between challenging behavior and co-morbid psychopathology in adults with intellectual disability (ID) and autism spectrum disorders (ASDs) ($N = 124$) as compared to adults with ID only ($N = 562$). All participants were first time referrals to specialist mental health services and were living in community settings. Clinical diagnoses were based on ICD-10 criteria and presence of challenging behavior was assessed with the Disability Assessment Schedule (DAS-B). The analyses showed that ASD diagnosis was significantly associated with male gender, younger age and lower level of ID. Challenging behavior was about four times more likely in adults with ASD as compared to non-ASD adults. In those with challenging behavior, there were significant differences in co-morbid psychopathology between ASD and non-ASD adults. However, after controlling for level of ID, gender and age, there was no association between co-morbid psychopathology and presence of challenging behavior. Overall, the results suggest that presence of challenging behavior is independent from co-morbid psychopathology in adults with ID and ASD.

© 2009 Elsevier Ltd. All rights reserved.

1. Introduction

Intellectual disability (ID) and autism spectrum disorders (ASDs) often co-occur at high rates and the relationship between the two conditions is complex (Berney, 2004; Matson & Shoemaker, 2009). The study of co-morbid psychopathology in ID and ASD has recently received increased attention (Bradley, Summers, Wood, & Bryson, 2004; Brereton, Tonge, & Einfeld, 2006; La Malfa et al., 2007; LoVullo & Matson, 2009; Melville et al., 2008; Tsakanikos et al., 2006) highlighting the need for understanding mental health and associated risk factors in this population. Despite the fact that adults with ID and ASD often present challenging behaviors (Matson, Kiely, & Bamburg, 1997; Murphy et al., 2005) the relationship between challenging behavior and co-morbid psychopathology in people with ASD remains poorly understood.

Severity of ID and presence of ASD are independently associated with presence of challenging behaviors (Dawson, Matson, & Cherry, 1998; O'Brien & Pearson, 2004; Reese, Richman, Belmont, & Morse, 2005). These behavioral problems can be viewed either as 'behavioral equivalents' of mental health problems (Clarke & Gomez, 1999) or as relatively independent conditions (Hemmings, Gravestock, Pickard, & Bouras, 2006; Hill & Furniss, 2006) which persist over time (Murphy et al., 2005).

* Corresponding author. Tel.: +44 0 20 3228 9745.
E-mail address: elias.tsakanikos@kcl.ac.uk (E. Tsakanikos).

0891-4222/$ – see front matter © 2009 Elsevier Ltd. All rights reserved.
doi:10.1016/j.ridd.2009.10.009

Table 1
Number and percentages of patients with and without ASD by gender, age, level of intellectual disability (ID) and challenging behavior.

Variable	*ASD*		
	Yes *n* (%)	No *n* (%)	Total *n* (%)
Gender			
Male	86 (69.3)	328 (58.4)	414 (60.3)
Female	38 (30.6)	234 (41.6)	272 (39.65)
Age (years)			
<24	61 (49.19)	173 (30.78)	234 (34.1)
25–34	38 (30.64)	119 (21.17)	157 (22.8)
35–44	15 (12.09)	131 (23.30)	146 (21.3)
45–54	4 (3.22)	77 (13.70)	81 (11.8)
55+	6 (4.83)	62 (11.03)	68 (9.91)
Level of ID			
Mild (F70)	52 (41.9)	381 (67.8)	433 (63.1)
Moderate (F71)	42 (33.9)	116 (20.6)	158 (23.0)
Severe (F72-73)	30 (24.2)	65 (11.6)	95 (13.8)
Challenging behavior			
Presence	109 (87.9)	349 (62.1)	458 (66.8)
Absence	15 (12.1)	213 (37.9)	228 (33.2)

The presence of challenging behaviors may hinder diagnosis of co-morbid psychopathology in those with ASD or may increase the prevalence rates of specific mental health problems as a result of psychological and social interacting factors. However, there is little evidence on the relationship between challenging behaviors and the presence of co-morbid psychopathology in adults with ID and ASD. Therefore, the present study examined whether the presence of challenging behavior in adults with ID and ASD would be associated with increased or decreased rates of co-morbid psychopathology as compared to adults with ID only.

2. Methods

2.1. Participants

Participants were 124 adults with ID who were clinically diagnosed with ASD and 562 adults with ID only. The age range was between 18 and 65, 60% were males (Table 1). All participants were consecutive referrals for assessment to a Specialist Mental Heath Service of South-East London. Referrals came 41.6% from Social Services, 36.9% from Primary Care and 21.5% from Generic Mental Health Services. Two psychiatrists both specialists in ID and mental health agreed on the diagnosis pervasive developmental disorder and/or psychiatric disorder by applying ICD-10 clinical criteria using information gained from interviews with key informants and the patients. The interviews were undertaken as part of the clinical assessment and included historical details from past medical and other records.

2.2. Data recording

Psychiatric diagnosis was coded according to the following major ICD-10 categories: schizophrenia spectrum disorder (F20-27), personality disorder (F60-69), anxiety (F40-48), depressive disorder (F32-39), adjustment reaction (F43), and dementia (F00-03). Other recorded variables were: age, gender, epilepsy and degree of ID. The degree of ID was coded on ICD-criteria into mild (F70), moderate (F71) or severe (F72-73) using information available on adaptive and intellectual functioning.

2.3. Assessment of challenging behavior

Challenging behavior was assessed through the DAS behavioral problems scale (DAS-B) as included in Disability Assessment Schedule (DAS) (Holmes, Shah, & Wing, 1983), which was developed to evaluate the level of functioning in people with intellectual disabilities. In this scale, behavioral problems are defined as any situation when members of staff have to intervene, causing upset to others, or having marked effect on the social atmosphere. Ratings were completed by key informants, such as family and professional carers. DAS-B had good internal reliability (Cronbach's Alpha = .87) in the present sample. Challenging behavior was operationally defined as the presence of at least one serious behavioral problem as assessed by DAS-B for at least 3 months (Holmes et al., 1983) with 3 months being considered a sufficient period of time to identify any significant problems present before the initial clinical assessment.

Download English Version:

https://daneshyari.com/en/article/372049

Download Persian Version:

https://daneshyari.com/article/372049

Daneshyari.com