



Trinity College Dublin

Coláiste na Tríonóide, Baile Átha Cliath

The University of Dublin

Mental Health and Loneliness

Angela Colgan

RNID, RPN, MSc., ANP

Head of Quality and Compliance Stewarts Care

Fidelma Flannery

RNID, BSc. (hons), MSc., Ph.D

Adjunct Assistant Professor TCD

Director of Nursing St. Michael's House



Stewarts
Per Tenebras Ad Lucem



St. Michael's House
Services for people with intellectual disabilities



Mental Health and Wellbeing

WHO 2022



World Health
Organization



The Intellectual Disability Supplement to
The Irish Longitudinal Study on Ageing
(IDS-TILDA)

Mental health is:

- A state of mental wellbeing that enables people to cope with the stresses of life, realise their abilities, learn well and work well, and contribute to their community.
- It is an integral component of health and wellbeing.
- Mental health is a basic human right.
- Mental health is more than the absence of mental disorders.
- Is experienced differently from one person to the next, with varying degrees of difficulty and distress and potentially very different social and clinical outcomes.

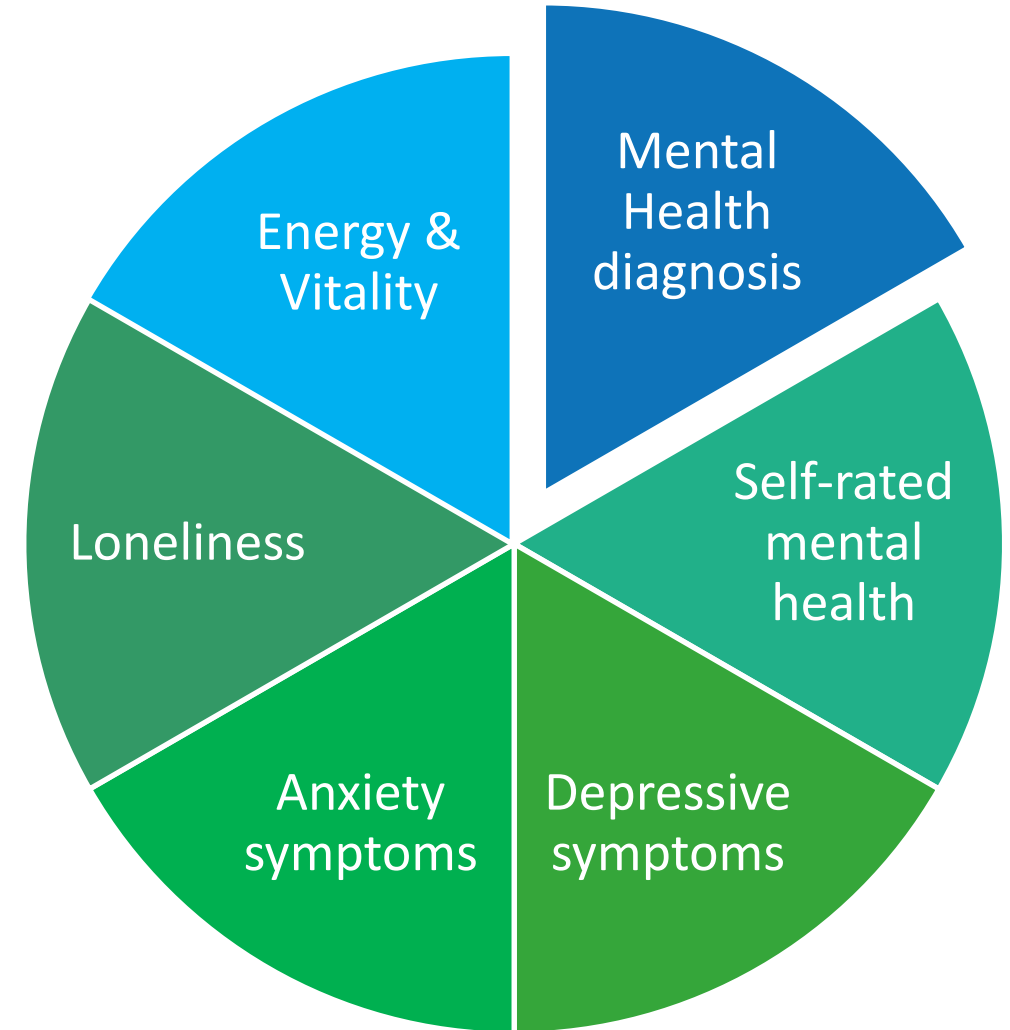


IDS TILDA Wave 5 – Mental Health and Wellbeing Measures



The Intellectual Disability Supplement to
The Irish Longitudinal Study on Ageing
(IDS-TILDA)

- Reported diagnosis of mental health disorder
- Self-rated Emotional & Mental health (5-pt Likert scale)
- Symptoms of Depression – Glasgow Depression Scale (GDS-LD)
- Symptoms of Anxiety – Glasgow Anxiety Scale (GAS-LD)
- Loneliness – UCLA Loneliness Scale (adapted)
- Energy and Vitality Index – questions from SF36





IDS TILDA Wave 5 – Mental Health and Wellbeing Results



The Intellectual Disability Supplement to
The Irish Longitudinal Study on Ageing
(IDS-TILDA)

Prevalence of mental health diagnosis at **Wave 5 (44.4%)** has decreased since **Wave 1 (49.9%)**

Remains considerably **higher** than in the general population

Anxiety was most prevalent diagnosis (**24%**) but has **decreased from Wave 1 (26.8%)**

Depression was second most prevalent (**13%**) also **decreased from Wave 1 (19.3%)**

Diagnosed depression in the **general population** is **5%** (TILDA 2017)





IDS TILDA Wave 5 – Mental Health and Wellbeing Results



The Intellectual Disability Supplement to
The Irish Longitudinal Study on Ageing
(IDS-TILDA)

↑ Wave 4: 7.2%, ↓ Wave 3: 10%

Men 4.3%

Women 10.6%

Living independently or with family 2.2%

Living in residential settings 5.1%

Living in community/group homes 12.2%

7.8%
Participants
had Symptoms
of Depression

Glasgow Depression Scale
(score of 13 or over indicates depression)

In the last week...	Prompts	no	some times	a lot
1.  Have you felt sad?	Have you felt upset, depressed, miserable, fed up, low?	0	1	2
2.  Have you been in a bad mood?	Have you felt bad tempered, wanted to shout at people?	0	1	2
3.  Have you enjoyed doing things?	Have you had fun?	2	1	0



IDS TILDA Wave 5 – Mental Health and Wellbeing Results



The Intellectual Disability Supplement to
The Irish Longitudinal Study on Ageing
(IDS-TILDA)

Women 25.3%, Men 15.5%

<50years 23.8%

50-64years 20.3%




>65years 18.1%

Living in Community/group home 23.1%

**21.1% participants
symptoms of
anxiety**

Glasgow Anxiety Scale.

(score of 15 or above indicates anxiety).

	Prompts	no	some times	a lot
1.  Do you worry a lot?	Feel wound up, get worked up	0	1	2
2.  Do you have lots of thoughts in your head?	Can't stop thinking, can't keep thoughts away.	0	1	2
3.  Do you worry about your family or friends?	Think something bad will happen.	0	1	2



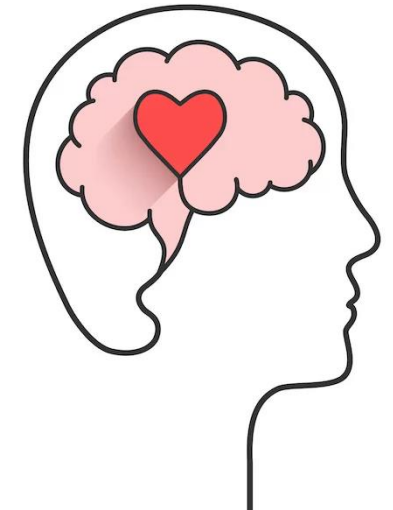
IDS TILDA Wave 5 – Mental Health and Wellbeing Results



The Intellectual Disability Supplement to
The Irish Longitudinal Study on Ageing
(IDS-TILDA)

- The Energy and Vitality Index – **mean score 68.9**
- Comparable to the general population
- Men **70.58**
- Women **67.43**
- **Higher** among those <50years (**71**)
- **Lower** among participants with severe/profound disabilities (**63.6**)
- **Slightly higher** among participants living independently/family (**71.7**)

Measuring
Positive Mental
Health





Loneliness



The Intellectual Disability Supplement to
The Irish Longitudinal Study on Ageing
(IDS-TILDA)

Loneliness is the subjective feeling of being alone or lacking social connections (Perlman & Peplau, 1998)

Emotional loneliness – ‘the absence of meaningful relationships’

Social loneliness – a ‘perceived deficit in the quality of social connections’

Existential loneliness – a ‘feeling of fundamental separateness from others and the wider world’

increased risk of cardiovascular disease, immune dysfunction, and premature mortality (Cacioppo & Patrick, 2008).

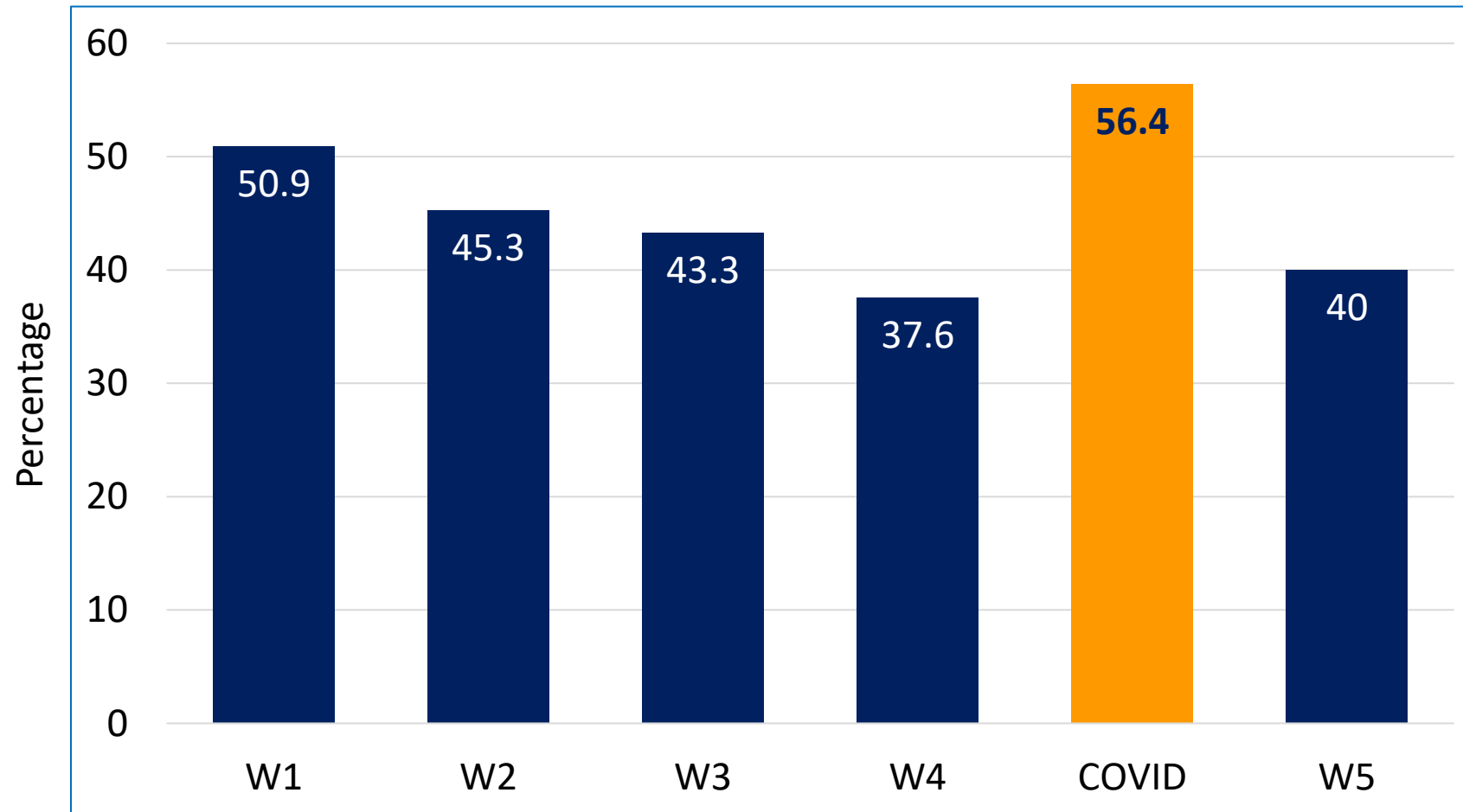




Do you ever feel lonely? (Yes)



The Intellectual Disability Supplement to
The Irish Longitudinal Study on Ageing
(IDS-TILDA)



IDS-TILDA Data Wave

40% still report
feeling lonely

More **women**
(45%)
experienced
loneliness than
men (38%)



Current Policy



The Intellectual Disability Supplement to
The Irish Longitudinal Study on Ageing
(IDS-TILDA)

- **Sharing the Vision** – A Mental Health Policy for Everyone
- **National Model of Service** – specialist mental health service for people with intellectual disabilities
- **Community based services** – MHID teams
- **CNS MHID, CNS CAMHS-ID, ANP MHID**
- **Disability services** – continue to address unmet needs (where MDTs are present)
- **Geographical & Resource Barriers**



‘Evidence on the precise interventions designed to meet the specific needs of individuals with intellectual disability is limited’ (Koslowski et al., 2016; Sheehan and Paschos, 2013, HSE 2021).

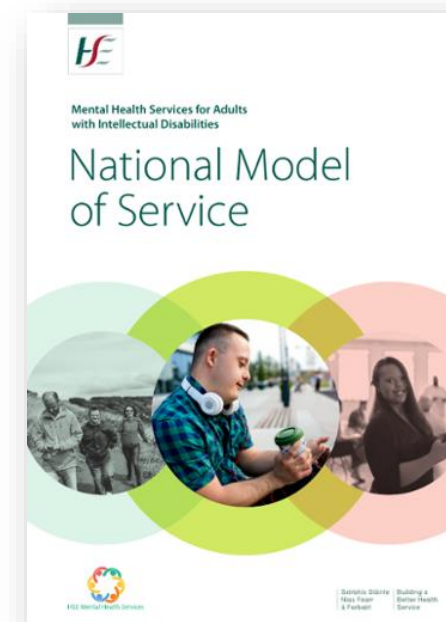
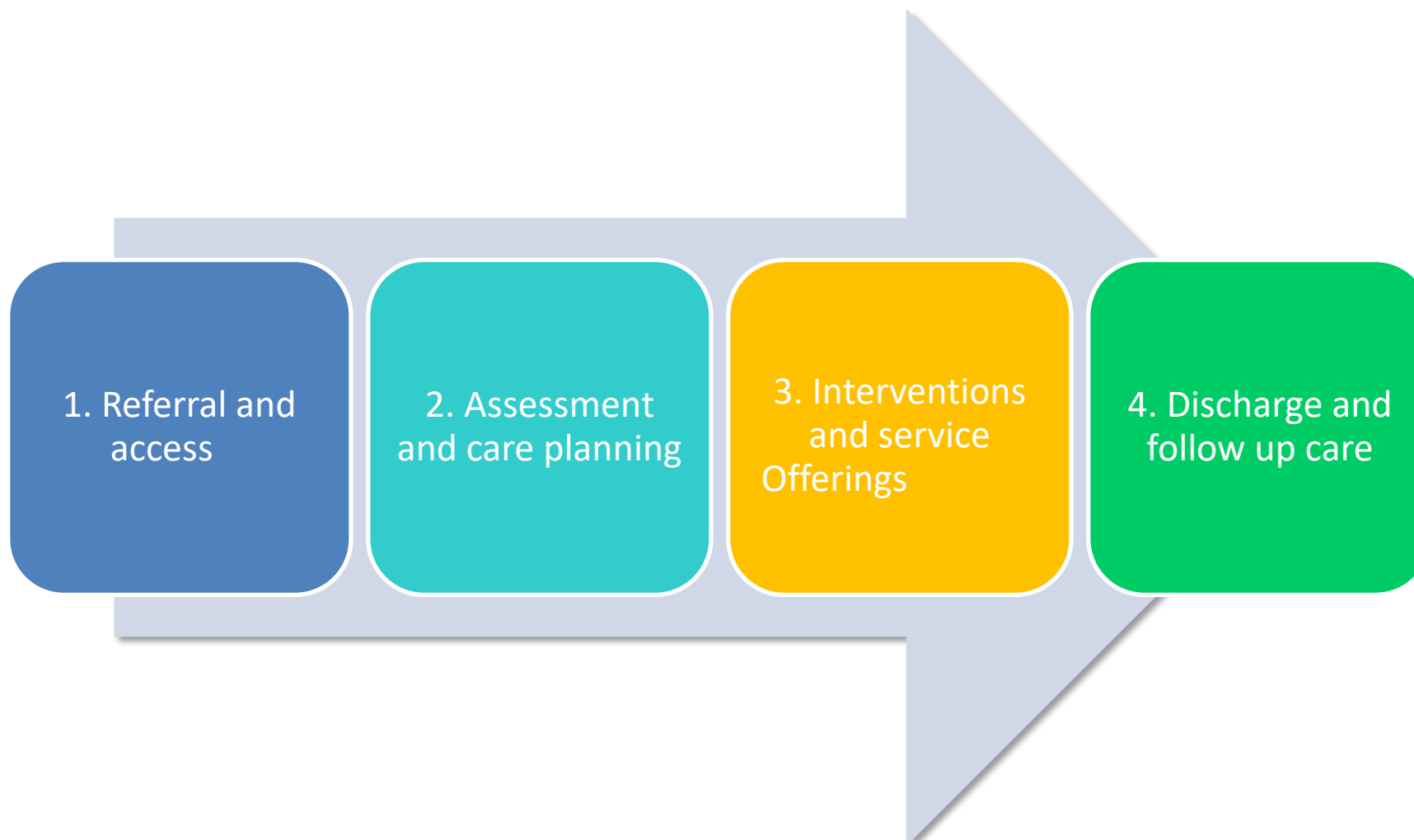


Practice Perspective

From referral to discharge MHID Model



The Intellectual Disability Supplement to
The Irish Longitudinal Study on Ageing
(IDS-TILDA)





Practice Perspective

Caseload and considerations



The Intellectual Disability Supplement to
The Irish Longitudinal Study on Ageing
(IDS-TILDA)



Current Perspective on MHID Caseload:

- **41%** of those are female
- **28%** of those supported are **over 40 and female**



Considerations:

- % of new referrals to MHID **are male and have ASD** are significantly **greater than the female referrals** received.
- **Diagnosis of ASD** in female population is **lower**.

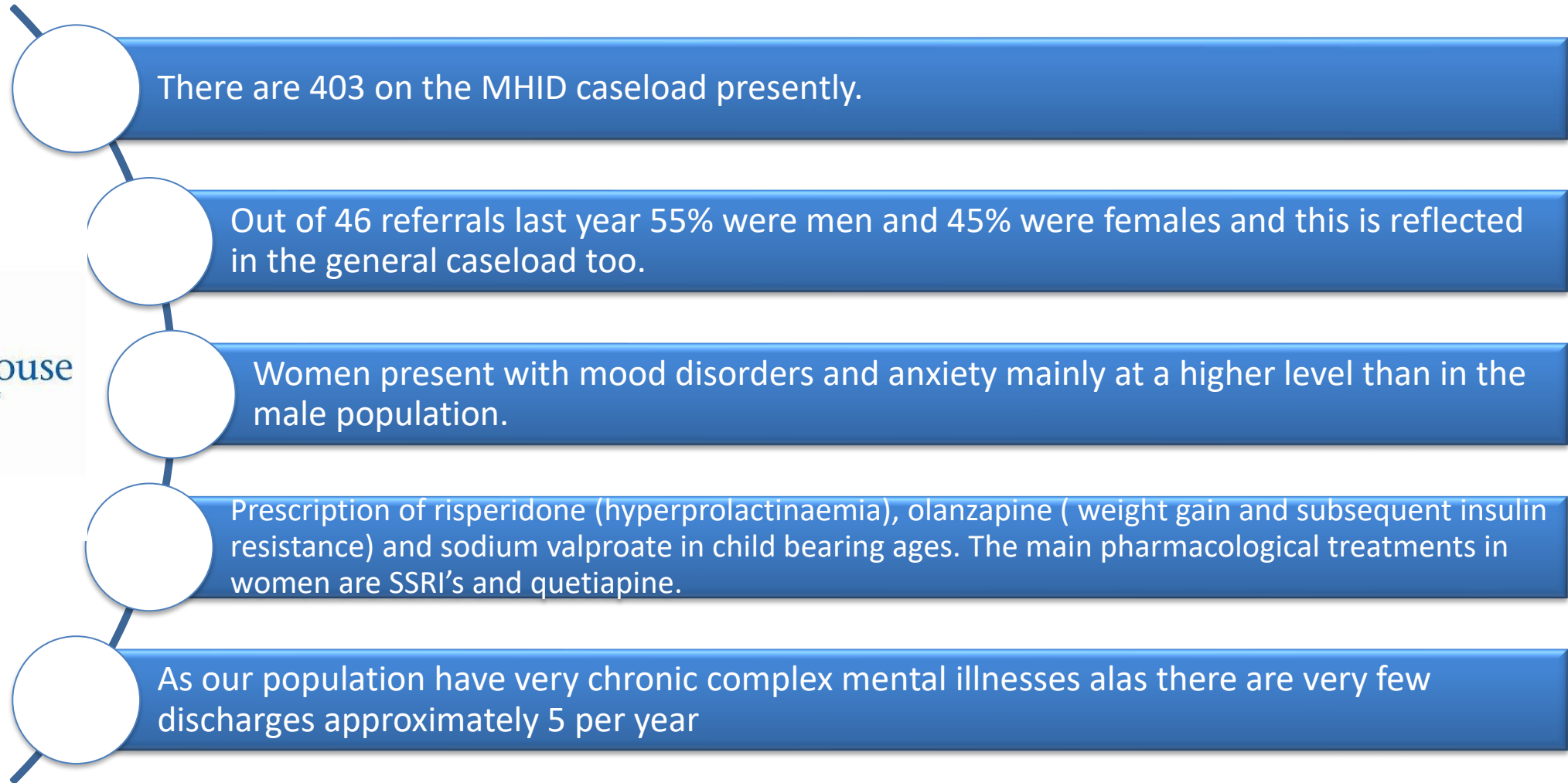


Mental Health Intellectual Disability Team

St. Michael's House



The Intellectual Disability Supplement to
The Irish Longitudinal Study on Ageing
(IDS-TILDA)



St. Michael's House
Services for people with intellectual disabilities



Practice perspective

Assessment Considerations



The Intellectual Disability Supplement to
The Irish Longitudinal Study on Ageing
(IDS-TILDA)

Assessments

- Mini PAS- ADD, Glasgow Depression Scale (GDS-LD), Glasgow Anxiety Scale (GAD-ID), Functional Behaviour Assessments – [Adapted and accessible](#)
- [Specialist MHID teams](#) trained to distinguish between behavioural manifestations of ID and co-occurring mental illness

Mental State Examination – Objective v Subjective

- [Accurate collateral](#) and assessments based on capabilities and supports

Self Reported mental well-being

- [Multi-Modal Assessment Approaches](#) -
- [Build emotional literacy](#) – individualised and accessible

Diagnostic Overshadowing

- Be alert to [subtle signs of anxiety, depression, or trauma](#)
- Consider other causes of symptoms – menopause, environmental, other health conditions.





Practice Perspective

Interventions and considerations



The Intellectual Disability Supplement to
The Irish Longitudinal Study on Ageing
(IDS-TILDA)

Non-pharmacological interventions

- Cognitive Behavioural Therapy (CBT) – it can require adaptations:

How to;

- Simplify concepts
- Engage support networks
- Build emotional literacy

Others include:

- Mindfulness & Relaxation
- Behavioural Interventions
- Social Skills Training
- Trauma Informed Care

Psychological and Psychosocial Interventions

(22 studies)

- eHealth and digital mental health interventions
- Cognitive Behavioural Therapy
- Eye-movement Desensitisation & Reprocessing (EMDR)
- Bright Light Therapy (BLT)
- Narrative Exposure Therapy (NET)
- Peer Mentorship



Practice Perspective

Interventions and considerations



The Intellectual Disability Supplement to
The Irish Longitudinal Study on Ageing
(IDS-TILDA)



Pharmacological interventions remain one of the most common intervention methods among this population .



- **Side effects** of medications and changing research – Sodium Valproate



- **Menopause** – Diagnostic overshadowing



- **Bone health** - Long term impact



- **Dependency** – Staff, family and individual



- **Lack of recovery orientated practices** – Time focused, outcome measures

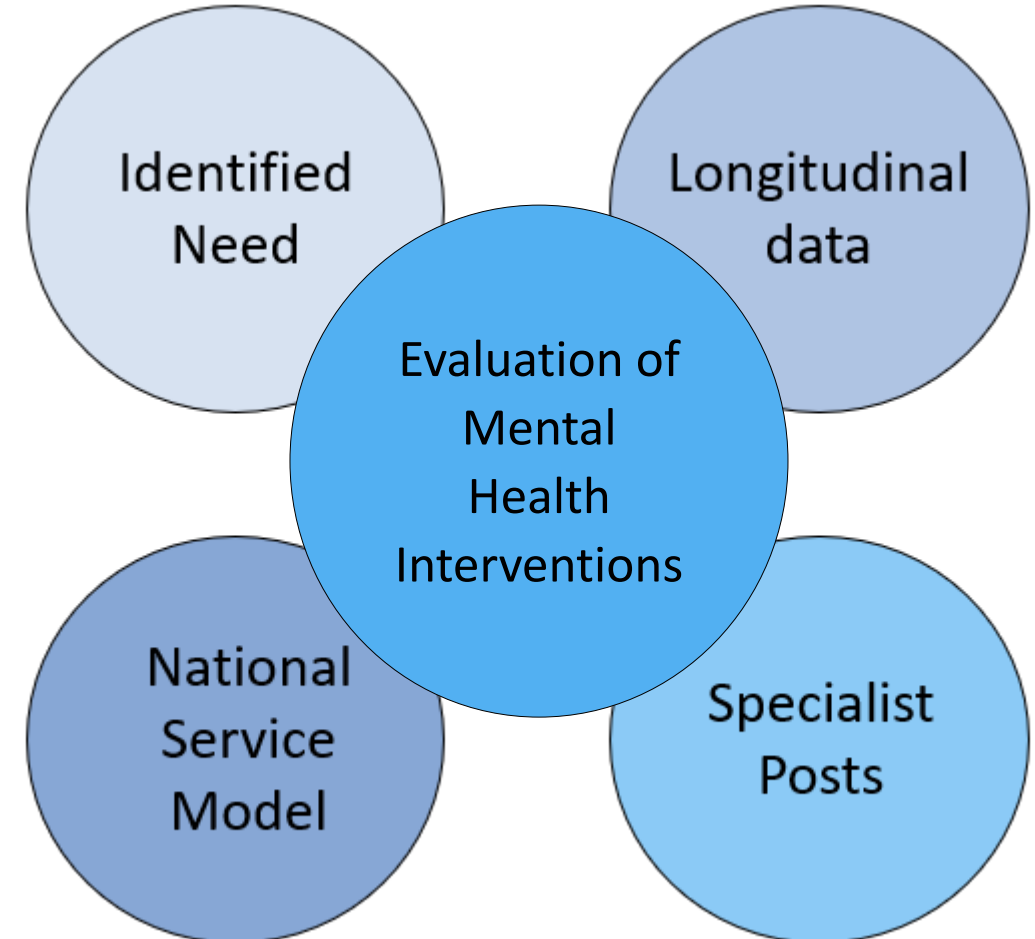


Conclusion



The Intellectual Disability Supplement to
The Irish Longitudinal Study on Ageing
(IDS-TILDA)

- Research identifying **increased mental health needs** among women with intellectual disabilities
- **Longitudinal data** identifying improvements in mental health and wellbeing
- **National Policy** to provision of mental health services to people with intellectual disabilities
- Development of **specialised posts** in intellectual disability and mental health
- To advance women's health research to **evaluate the effectiveness of mental health interventions** currently being delivered, recovery, and mental health promotion



IDS-TILDA

Acknowledgements



The Intellectual Disability Supplement to
The Irish Longitudinal Study on Ageing
(IDS-TILDA)

The IDS-TILDA Team extends grateful appreciation to:

- Participants, Families and Carers
- The IDS-TILDA Steering Committee and International Scientific Advisory Board
- Advisors and Advisory Groups
- Our Funders





Trinity College Dublin

Coláiste na Tríonóide, Baile Átha Cliath

The University of Dublin

Thank You

<https://www.tcd.ie/tcaid/>

<https://idstilda.tcd.ie/>

@ageingwithID

#ageingwithID

flannef@tcd.ie

angela.colgan@stewartscare.ie