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of the
Developmental Disabilities Program**

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Annual Dr. Greta T. Swart Essay Competition

An annual essay award is available to an undergraduate medical student at the Schulich School of Medicine & Dentistry, Western University. The essay should describe an experience managing a patient at any stage in the lifespan with a developmental disability. This includes management of physical health, mental health or both, either in the hospital system or in the community, including family medicine.

One of the submissions to the 2022 competition was by Jerusha Selvanayagam (Year 3, Medical Student, Schulich School of Medicine & Dentistry, Western University). It is featured below.

Caring for Those with Developmental Disabilities

Throughout our medical education, we learn about a vast array of medical conditions. From the pathophysiology of hypertension to the long lists of DSM criteria for mental health disorders, we digest all this information in compact lectures on each topic. Each condition we learn about is like a neatly packaged puzzle box that we can open up and piece together to get a good understanding of the condition. Although we are able to gain immersive knowledge this way and store all the information organized in these little boxes in our heads, we run into problems when we are faced with the

reality that real-life patients do not present with such neatly organized problems. Rather, they present with complex problems and comorbidities that require us to rip open different puzzle boxes and leave us trying to put together pieces from different puzzles that do not always fit. I was faced with this reality when I was involved in the care of a patient during my psychiatry clerkship rotation. My experience managing this patient, a 22-year-old female with schizophrenia and an intellectual disability, made me realize that managing mental health conditions in individuals with developmental disabilities can be very complex. There are several challenges that impede individuals with developmental disabilities from receiving equitable care. Specifically, I was able to recognize that caring for such individuals could be impaired by challenges faced by the individual themselves, challenges experienced by the health care provider and by systemic challenges that would need to be addressed to provide equitable care for people with developmental disabilities.

Patients with intellectual disabilities encounter unique challenges when receiving treatment for mental health conditions. Experiencing conditions like schizophrenia can be very frightening for any individual but it can be even more terrifying for an individual with an intellectual disability due to their poor insight and understanding. This patient had to be hospitalized due to concerns for her own safety due to her schizophrenia however the patient was not able to understand why she was being kept there and her frustration was very evident. Beyond being unable to understand the reasoning for her hospitalization, an even bigger challenge the patient faced was in trying to articulate this frustration to people around her. She had difficulties in communicating which made it hard for us to understand what she was trying to convey, and this frustrated her even further. Although many people lack insight when it came to these situations in advocating for themselves. In my experience with this patient, she would often break

down in tears or become physically aggressive due to her frustration of not being able to communicate to those around her. Furthermore, these individuals also faced an additional layer of challenges when accessing mental health care due to increased stigma. Despite our best efforts, there is still stigma surrounding mental health conditions in health care but having an intellectual disability worsens this stigma which may cause them to be easily dismissed when interacting with health care workers and nurses. I was able to recognize the intersectionality of discrimination when considering this patient that had these two factors of intellectual disability and mental health that marginalized them. For this vulnerable population, their deficits in adaptive functioning skills and the stigma they encounter are some of the major barriers they face when receiving health care.

In addition to the challenges faced by individuals with intellectual disabilities when accessing mental health care, health care providers also face several challenges when providing care to these individuals. One of the difficulties for health care providers involved the diagnosis of mental health conditions in these individuals. Many of the assessment tools and interviewing methods used in psychiatry can be hard to use in individuals who do not have strong communication skills or cognition. Physicians would require a good understanding of the patient's baseline level of functioning and behaviours in order to properly evaluate for any new diagnosis that would be distinguished clearly from their disability. We are taught in medical school that we can work around these problems by getting collateral history from family members or friends, but I was able to understand that this may not always be very easy in real-life when family members may be reluctant to get involved and when you have several patients to see with a busy schedule as an attending. For example, we had several difficulties in trying to reach our patient's sister despite her being our patient's substitute

decision maker. Another obstacle that makes providing management for these individuals challenging is consent and their capacity to make decisions about their care. It can be difficult to navigate these situations and may cause some distress on the part of the physicians since they may not be able to help the patient understand why they require treatment which causes an antagonist perception of the physician by the patient. Lastly, another aspect of management that can be difficult for health care providers is the assessment of the patient's response to treatment. The trajectory of mental health conditions and response to treatment may be quite different in terms of presentation for individuals with intellectual disabilities. This can make it hard for physicians to be reassured about their management plan and could significantly delay discharge of the patient. Altogether, there are several unique challenges related to diagnostic tools, consent and response to treatment that health care provider must face when delivering care to this population.

Beyond patients and health care providers, I believe that there are also challenges on a systemic level that affect the quality of care that individuals with intellectual disabilities receive. One of these issues includes the assessment tools and diagnostic criteria currently used to diagnose and manage patients with mental health disorders. For example, the DSM criteria may require a certain level of communication from the patient about their thoughts, perceptions and experiences however people with intellectual disabilities may not always be able to articulate all this information. For example, my patient was not able to understand the concept of mood or how she would rate her own mood which impaired our ability to assess her mental status for a full psychiatric workup. Perhaps, alternative modes of non-verbal assessment should be employed for these individuals in addition to the typical psychiatric interview format. On the same note, medical education as a whole could also play a part in recognizing these

systemic barriers. As discussed earlier, our education is usually delivered in neatly packaged lectures which is helpful for learning but fails us when trying to treat individuals with several issues that superimpose on each other. Perhaps, more time should be spent in medical education on helping us navigate these situations and finding creative ways to make health care accessible to everyone. Finally, the way our healthcare system is organized can also be a challenge when trying to provide equitable care for individuals with developmental disabilities. For example, our patient was hospitalised and had to be placed in the psychiatric ward with other people and situations that were further triggering. Especially for individuals with intellectual disabilities, they can find it very hard to cope in these settings without the adequate additional support they may need in comparison to other mental health patients without an intellectual disability. Unfortunately there is no easy solution around this because of the limitation of our healthcare system as a whole but we can certainly recognize that this could be a challenge that more severely affects those with developmental disabilities. Further identifying and investigating these systemic barriers can help us find ways to address these issues.

In summary, my experience in managing a patient with an intellectual disability helped me recognize the complexities and unique needs that need to be addressed in the care of individuals with developmental disabilities. This eye-opening experience highlighted to me the various levels of obstacles that exist when providing equitable care for these individuals. These barriers were evident on a patient level, a health care provider level and a systemic level. Addressing these issues will require changes and support on many fronts. For example, the development of more appropriate diagnostic tools for health care providers, specialised support in the hospital settings for individuals with developmental disabilities to help them cope, and more focus on medical education

surrounding these issues on a systemic level would be some ways in which we could cater to the unique needs of these individuals. This experience was certainly difficult, but I am very grateful for such an experience as I was able to learn a lot from it and I was able to build true empathy. At times, this experience left me feeling frustrated or hopeless because I could not address all of the issues, I could identify but it made me recognize that although I would not be able to solve all the problems these individuals face as a single medical student, I could certainly do my part when put in these situations to advocate for them. My experience has made me come to the start realization that health care is more than applying medical concepts and knowledge, but rather it truly does involve treating a patient as a whole. The patients we see cannot be reduced to a single diagnosis and they require our ability to listen and adapt to their unique needs. Through this experience, I am motivated to advocate for individuals with developmental disabilities as a future health care professional and do all I can to make health care accessible and equitable for this vulnerable population.

21st Annual Developmental Disabilities Spring CPD

The 21st Annual Developmental Disabilities Spring CPD will be held in person at the Ivey Spencer Leadership Centre (www.iveyspencerleadershipcentre.com) and online on Wednesday March 22, 2023.

This year we are thrilled to welcome the following three speakers:

Dr. Mary Jenkins

Dr. Jenkins is an Associate Professor in the Department of Clinical Neurological Sciences at the Schulich School of Medicine & Dentistry at Western University. Dr. Jenkins specializes in both Adult and Paediatric Movement Disorders including Parkinson's disease, Tourette Syndrome, and other movement disorder diseases. She is also the CBME Lead and Competence Committee Chair for the Neurology Residency Program.

Dr. Caitlin Cassidy

Dr. Cassidy is an Associate Professor in the Physical Medicine and Rehabilitation Department in the Schulich School of Medicine & Dentistry at Western University. Dr. Cassidy's main clinical focus is the Transitional and Lifelong Care (TLC) Program, housed primarily at Parkwood Institute. The program provides long term rehabilitative care to people with chronic and sometimes complex conditions of childhood onset, including Cerebral Palsy, Spina Bifida and others. Dr. Cassidy's other clinical responsibilities include regular electrodiagnostic clinics at St. Joseph's Health Care, specialty teen clinics at Thames Valley Children's Centre, and inpatient coverage of the Musculoskeletal Rehabilitation Unit at Parkwood Institute.

Dr. Jennie Wells

Dr. Wells is an Associate Professor in the Department of Medicine at the Schulich School of Medicine & Dentistry at Western University. Dr. Wells is an internist and geriatrician. In June 2011 she assumed the role of Chair of the Division of Geriatric Medicine.

Registration for this event will open early in 2023. A complimentary lunch is provided for all in-person attendees at 12pm, and the learning event will be held from 1pm to 4:30pm. In-person registration is limited to 75 attendees, so early registration is encouraged.

Check our website for more information, and to register for this event: [Spring CPD](#)

8th Annual Dr. Benjamin Goldberg Developmental Disabilities Research Day

The 8th Annual Dr. Benjamin Goldberg Developmental Disabilities Research Day will be held in person at the Great Hall at Western University, and online on Thursday June 8, 2023.

Thursday June 8, 2023. Great Hall, Somerville House, Western University.

[Maps & Directions - Western University \(uwo.ca\)](#)

This annual Research Day has been held at Western University since 2016. It began as a small event with invited speakers for internal faculty and trainees.

It has grown over the years in size and scope, now featuring presentations from researchers at other Universities in Southwestern Ontario.

In 2023, the Developmental Disabilities Program in the Department of Psychiatry at the Schulich School of Medicine & Dentistry at Western University is thrilled to accept abstracts for presentation from all Universities across Ontario.

There is a breadth of exceptional, exciting, and innovative research happening in departments and faculties across Universities in Ontario specific to Intellectual Disabilities and/or Autism Spectrum Disorder. We hope this event can showcase this exciting work in a comprehensive way.

Abstracts will be considered without preference to any University, department, school, or faculty. Presentations will be accepted for both in-person and virtual presentation.

An exciting Keynote Address will be announced very soon.

The Call for Abstracts is open. Please visit our website for more information and to submit your abstract: ddp.uwo.ca

Spring 2023 Student Competitions

The Developmental Disabilities Program hosts an essay competition each spring for medical students. The **Annual Dr. Greta T. Swart Essay Competition** is an annual competition open to undergraduate medical students at the Schulich School of Medicine & Dentistry, Western University. The essay should describe an experience managing a patient at any stage in the lifespan with a developmental disability. This includes management of physical health, mental health, or both, either in the hospital system or in the community, including family medicine.

The essay should be 1,500 to 2,000 words in length and typed double spaced with the total word count placed at the top right-hand corner of the first page. Entries beyond 2,000 words will not be considered.

The amount of the award is \$1,000. All essays submitted will be published in the *Clinical Bulletin of the Developmental Disabilities Program*.

To apply for this award, please visit the [UME Awards website](#).

The application deadline is **March 31**.

Each Spring the call for submissions opens for the **Annual Dr. Benjamin Goldberg Research Grant Competition**.

This grant is meant to facilitate research specific to intellectual disabilities (as defined by DSM 5). Proposals may involve investigations of causes, diagnosis, and/or treatment of intellectual disabilities (ID). Proposals may also involve conditions that are comorbid with ID (such as Autism Spectrum Disorder or Epilepsy), but the project must ultimately be directly about ID.

This competition is open to any student (undergraduate or graduate) registered at the Western University Community. Applications are also invited from students registered at other Universities or Colleges in southwestern Ontario.

Applications from all academic departments will be accepted, without preference to any department, school, or faculty. The value of an award may range up to \$5,000, with the actual value of each award being determined by the number of funded proposals and the quality of each proposal. The awards are not limited in scope – rather they are for any and all research projects which are of relevance to the understanding of the causes, diagnosis, and treatment of intellectual disabilities.

For more information about eligibility criteria, please visit our [website](#).

Developmental Disabilities Clinical and Research Rounds

The Developmental Disabilities Clinical and Research Rounds continue on January 11, 2023 online.

The January talk will be titled “**Severe Self-Injury in Children**”. The speaker is Dr. Robin Friedlander from the University of British Columbia.

Visit our website for more information and to join these rounds: ddp.uwo.ca

This presentation will be recorded. Any audiovisual recording may be used in the future for educational or promotional purposes, inclusion on websites, social media, or any other purpose that the Developmental Disabilities Program at Western University deems appropriate. If you choose to ask a question verbally or participate verbally in any discussion, you are presumed to consent to the use of your comments, your voice, and your image in the recording and future use of this presentation. If you do not want any audio recordings made of your voice, please use the question and answer function in Zoom if you have a question.

Developmental Disabilities Clinical and Research Rounds are a self-approved group learning activity (Section 1) as defined by the Maintenance of Certification program of The Royal College of Physicians and Surgeons of Canada (1 credit).

The Developmental Disabilities Program is approved by the Canadian Psychological Association to offer continuing education for psychologists. The Developmental Disabilities Program maintains responsibility for the program.

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Submissions welcome. Articles published or abstracted in this Bulletin do not necessarily reflect the opinions of Western University or the Developmental Disabilities Program.