

Autistica Action Briefing: Post-Diagnostic Support for Adults

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Autistica is the UK's autism research charity. This briefing summarises the most important scientific findings about post-diagnostic support for autistic adults. It was developed in collaboration with leading researchers and autistic people with experience of adult diagnosis as an insight into the latest evidence.

We strongly urge the Department of Health and Social Care, NHS policy-makers, commissioners, services and public research funders to act on this information. Chances are being missed to tackle autistic health inequalities. Supporting autistic adults when they receive a diagnosis and throughout their lives is crucial for improving those outcomes. Services and public policy need to see post-diagnostic support as their opportunity to make a difference. www.autistica.org.uk/AutismStrategy

“Support services are practically non-existent for adults. Our outcomes are abysmal. The attitude that ‘if we got by this long, we can continue to get by’ is horrifying. We have already lost so much.”¹

What we know

“We are given the diagnosis and then left to sink or swim with no support and no assistance.”¹

- **A lack of support after diagnosis is the norm rather than the exception**, particularly for autistic adults without a learning disability.² Despite large demand for post-diagnostic support¹ and a significant impact on outcomes,³ the options available for autistic adults are often limited or non-existent.^{1,2,3,4,5,6}
- **Services are often not commissioned or funded to support people after diagnosis.** Despite growing clinical consensus that follow-up support should be offered to maintain good health and optimise quality of life, many diagnostic teams are not resourced to implement this. Some can only offer group-based services which are inaccessible to some autistic people, whilst others cannot offer any support at all.^{7,8}
- While autism is not a mental health condition, **mental health conditions affect the majority of autistic people.**^{9,10,11,12} There is an opportunity to introduce low-level support which could reduce the need for crisis or inpatient services.^{1,13,14,15}
- **Autistic people have poorer health outcomes**¹⁶ and are more likely to experience a range of conditions.¹⁷ Following up effectively after diagnosis creates opportunities to identify and overcome health inequalities, a key priority in the NHS Long Term Plan.¹⁸
- **Autistic people report a lower quality of life**¹⁹ and face **exceptionally high rates of unemployment**^{20,21} and **social isolation**,^{22,23} both of which also impact health outcomes.^{24,25} Support beyond diagnosis could enable autistic people to access opportunities to play a more active role in their communities and the economy.²⁶

What we need to find out

“No follow-up support was offered. They told me I was too old and that I did not need it... All I got was two website addresses on a piece of paper.”¹

Too little research has focused on the ideal ways to support autistic people as adults.^{4,27} Receiving an autism diagnosis is a key opportunity to help autistic adults access the support they need. For this to be effective, research needs to consider:

- Which services and professionals are currently involved in supporting autistic adults immediately after diagnosis in the UK? How effective are existing post-diagnostic support models in improving quality of life for autistic adults?
- What methods of delivering psycho-educational support are effective at helping autistic adults come to terms with what their diagnosis means and maximising their quality of life?
- How can diagnostic teams most effectively co-ordinate support for autistic adults after diagnosis between referrals to mainstream services or specialist post-diagnostic services?
- To what extent is longer-term, low-level support effective in improving outcomes for autistic adults? How can effective “step-on, step-off” support, available as and when needed by autistic adults, be made sustainable?
- Are peer support programmes effective for improving post-diagnostic outcomes (e.g. mental and physical health, wellbeing, understanding of autism and autonomy) for autistic people?²⁸ How can we optimise peer support programmes for personalised goals?

What we should do now

“Feeling shaken and vulnerable, I went to my GP to see what help or support might be available in adapting to life with my diagnosis, and the answer was ‘None’.”¹

- Autistic people require varying levels of support at different points in their lives, for example during transition to adulthood, commencing employment, retirement and bereavement. However, there are currently few contact points within the NHS for autistic adults after diagnosis, aside from inpatient settings and services for people with learning disabilities.

NHS England should consider supporting Sustainability and Transformation Partnerships and Integrated Care Systems to pilot models of ongoing low-level support for autistic adults and collect data to evaluate the effectiveness and sustainability of different approaches.

- Post-diagnostic support has a vital role to play in tackling poor health outcomes among autistic adults, and there is increasing evidence about how to do it more effectively.^{7,8} The Long Term Plan made tackling autistic health inequalities an NHS clinical priority but how diagnosis and ongoing support for adults will be improved has not yet been specified.^{18,29}

The NHS Long Term Plan workstream on autism should prioritise work to identify optimal diagnostic and post-diagnostic pathways for autistic adults. This should be considered alongside other initiatives in the Long Term Plan, like the introduction of health checks for autistic people.

- The 2014 Adult Autism Strategy³⁰ set out that making “*person-centred local health, care and support services*” available for autistic people was one of the “*priority challenges for action*”.³¹ This is still not the case in most areas. The importance of person-centred care was recently highlighted by the National Autistic Taskforce.³²

The Department of Health and Social Care should ensure that its new Strategy³³ includes a specific focus on supporting autistic adults after diagnosis.

- Changes to the Mental Health Services Data Set last April mean that more reliable data will become available about autistic adults and their interactions with NHS services.^{34,35} This data could help provide valuable insights into the healthcare services autistic adults use beyond diagnosis.

NHS Digital, NHS England and the National Institute for Health Research should meet with the Department of Health’s autism data group to commission an analysis of the services autistic adults use after they have been diagnosed, using the MHSDS and other public sector datasets.

- Autistic people frequently report the need for low-level preventative support,¹ and such approaches have found success in other fields such as mental health.¹⁴

The Department of Health and Social Care, NHS England, and public, private and third sector research funders need to collaborate to facilitate research around low-level, cost-effective interventions to support autistic people and their families beyond diagnosis.

1 Autistica (Unpublished). What would a more inclusive and supportive society look like? Online consultation of autistic people and supporters, conducted in October 2018.
2 Public Health England (2017). Autism Self-Assessment Exercise 2016: Detailed report and thematic analyses. <[bit.ly/2Thsp8s](#)>
3 Jones L, et al (2014). Experiences of Receiving a Diagnosis of Autism Spectrum Disorder: A Survey of Adults in the United Kingdom. Journal of Autism and Developmental Disorders. 44(12), 3033–3044. <[ncbi.nlm.nih.gov/pubmed/24915932](#)>
4 Murphy CM, et al. (2016) Autism spectrum disorder in adults: diagnosis, management, and health services development. Neuropsychiatric disease and treatment. 12, 1669. <[bit.ly/2WdRxlR](#)>
5 Powell T and Acker L (2015). Adults’ Experience of an Asperger Syndrome Diagnosis: Analysis of Its Emotional Meaning and Effect on Participants’ Lives. Focus on Autism and Other Developmental Disabilities 31(1), 72-80. <[journals.sagepub.com/doi/abs/10.1177/1088357615588516](#)>
6 Crane L, et al. (2019) Understanding psychiatrists’ knowledge, attitudes and experiences in identifying and supporting their patients on the autism spectrum: online survey. BJPsych Open 5, e33, 1-8. <[bit.ly/2UJhMfr](#)>
7 Wigham S, et al (manuscript in preparation). Improving diagnostic and post diagnostic services for autistic adults. Evidence from autistic people, relatives and UK diagnostic teams. <[autistica.org.uk/our-research/research-projects/better-diagnosis-of-autism-in-adults](#)>
8 Beresford B, et al. (due 2019). The SHAPE project: mapping and evaluating Specialist Autism Team service models. <[york.ac.uk/spru/projects/shape](#)>
9 Lever A & Geurts H (2016) Psychiatric Co-occurring Symptoms and Disorders in Young, Middle-Aged, and Older Adults with Autism Spectrum Disorder. Journal of Autism and Developmental Disorders 46(6), 1916-1930. <[ncbi.nlm.nih.gov/pubmed/26861713](#)>
10 Baxter A, et al. (2015) The epidemiology and global burden of autism spectrum disorders. Psychological Medicine 45(3), 601-613. <[ncbi.nlm.nih.gov/pubmed/25108395](#)>
11 Lugo-Marín J, et al. (2019) Prevalence of psychiatric disorders in adults with autism spectrum disorder: A systematic review and meta-analysis. Research in Autism Spectrum Disorders 59, 22-33. <[bit.ly/2lQ4KqN](#)>
12 Tromans S, et al. (2018). The Prevalence of Autism Spectrum Disorders in Adult Psychiatric Inpatients: A Systematic Review. Clin Pract Epidemiol Ment Health 14, 177-187 <[bit.ly/2JaXlfw](#)>
13 Vohra R, et al. (2016) Emergency Department Use Among Adults with Autism Spectrum Disorders (ASD). Journal of Autism and Developmental Disorders 46(4), 1441-1454. <[bit.ly/2PEbJDU](#)>
14 Johnson S, et al. (2018) Peer-supported self-management for people discharged from a mental health crisis team: a randomised controlled trial. The Lancet 292(10145), 409-418. <[bit.ly/2Qn3ew8](#)>
15 Local Government Association, Adass and NHS England (2017). Transforming Care Model Service Specifications: Supporting implementation of the service model. <[bit.ly/2pXPwph](#)>
16 Ryzewska, E. et al. (2019) General health of adults with autism spectrum disorders – A whole country population cross-sectional study. Research in Autism Spectrum Disorders 60, 59-66. <[sciencedirect.com/science/article/pii/S1750946719300133](#)>
17 Croen L, et al. (2015) The health status of adults on the autism spectrum. Autism 19(7), 814-123. <[ncbi.nlm.nih.gov/pubmed/25911091](#)>
18 NHS (2019). The NHS Long Term Plan. <[longtermplan.nhs.uk/wp-content/uploads/2019/01/nhs-long-term-plan.pdf](#)>
19 Mason D, et al. (2018) Predictors of Quality of Life for Autistic Adults. Autism Res 11(8), 1138-1147. <[ncbi.nlm.nih.gov/pmc/articles/PMC6220831](#)>
20 National Autistic Society (2016). The autism employment gap: Too Much Information in the workplace. <[autism.org.uk/get-involved/tmi/employment.aspx](#)>
21 Allen M & Coney K (2018). What Happens Next? 2018: A report on the first destinations of 2016 disabled graduates. The Association of Graduate Careers Advisory Services. <[bit.ly/2LnCRs6](#)>
22 Ormsord G, et al. (2013) Social Participation Among Young Adults with an Autism Spectrum Disorder. J Autism Dev Disord 43(11), 2710-2719. <[ncbi.nlm.nih.gov/pmc/articles/PMC3795788](#)>
23 Howlin P, et al. (2000) Autism and developmental receptive language disorder—a follow-up comparison in early adult life. II: Social, behavioural, and psychiatric outcomes. <[bit.ly/2V5BamL](#)>
24 Durling D (2009). Unemployment and health. BMJ 333:b829. <[bmi.com/content/338/bmj.b829](#)>
25 Holt-Lunstad J, et al. (2015) Loneliness and social isolation as risk factors for mortality: a meta-analytic review. Perspect Psychol Sci 10(2), 227-37. <[ncbi.nlm.nih.gov/pubmed/25910392](#)>
26 Buesscher A, et al. (2014) Costs of Autism Spectrum Disorders in the United Kingdom and the United States. JAMA Pediatrics 168(8), 721-728. <[bit.ly/2DGsMAN](#)>
27 Pellicano E, et al. (2013) A future made together: Shaping autism research in the UK. London: Institute of Education. <[issuu.com/crae.ioe/docs/a_future_made_together_ioe.pdf](#)>
28 Autistica (2018). National research funders prioritise mental health of autistic people. <[autistica.org.uk/news/5-ways-the-government-can-transform-mental-health-in-autism](#)>
29 Dunhill L (2018) Learning disabilities and autism added to long-term plan clinical priorities. Health Service Journal. <[bit.ly/2DEUE82](#)>
30 DHSC (2015). Think Autism: an update to the government adult autism strategy. <[bit.ly/1eef55P](#)>
31 DHSC (2015). Think autism: updating the 2010 adult autism strategy. <[bit.ly/2CXoDYi](#)>
32 National Autistic Taskforce (2019). An independent guide to quality care for autistic people. <[bit.ly/2Uga6lp](#)>
33 Hansard (2019). Minister of State for Care, responding to Health and Social Care Oral Questions on 15th Jan 2019. <[bit.ly/2RRPoolZ](#)>
34 Hansard (2017). Minister of State for Health responding to a debate on autism diagnosis, 13th September 2017. <[bit.ly/2GitUNn](#)>
35 Minister of State for Care (2019). Written Answer to Parliamentary Question 208401. <[bit.ly/2SrsUx9](#)>