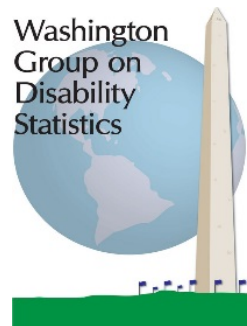


# WG Mental Health Work Group Update

Potential Enhancements to the WG Tools  
to More Completely Capture Mental Health Functioning



17<sup>th</sup> Annual Meeting of the Washington Group on Disability Statistics  
Sydney, Australia  
31 October – 2 November 2017

# Background

- Context:
  - Growing request/demand from people with psychosocial disability to be included in statistics
    - **Severe mental disorders (SMDs)**
      - Intellectual disability – already identified?
      - Dementia – already identified?
    - SMDs are low prevalence disorders but with significant disability and associated care needs.
    - SDGs include mental illness
- How do we ensure people with severe mental illness are identified in disability statistics?
  - Additional measures
  - Review extent to which current measures do identify this population

# Summary Findings from the Scoping Review

## 1. Common activity limitations currently not included in WG-ES:

- **Social functioning and relationships/Communication:** family, friends, community
- **Controlling behaviour:** getting upset, conflict with others, misinterpretations, violent
- **Formal/Informal work and domestic activities** (washing clothes, preparing food, daily routine)
- **Community Activities**

## 2. Common Environmental factors to consider:

- **Attitudes:** family, community, professionals
- **Support:** family, professionals, etc.
- **Poverty:** from lack of employment, etc.
- **Medication:** access to and side effects of

# Three Suggestions from Scoping Review

1. Add 1 question to the WG-ES: on social functioning.
2. Add 3 - 4 questions to the WG-ES: to capture more detailed information on social functioning and personal interactions.
3. Develop a separate mental health module for use in specialised surveys requiring more detailed information on mental health (e.g. for use on general or health/mental health surveys).

# Additional Question to the WG-ES: Social Functioning

- Additional measure must reflect:
  - Common aspects of functioning across a number of SMDs
  - Basic functioning as far as possible – not a complex participation focus
  - Be suitable for self-reporting and proxy reporting.
- Few examples available

# Self vs. Proxy Report (surveys): An Example

***WHODAS 2: Getting along with people (last 30 days; 5 point likert)***

**1. Dealing with people you do not know?**

**2. Maintaining a friendship?**

3. Getting along with people who are close to you?

4. Making new friends?

- NCHS testing showed poor performance and seems to focus on participation more than basic activity.
- How to avoid over identification – i.e. difficulties due to reason other than SMD

# A Further Example: Performance-based and Observational Assessments (Clinical Context)

- Behavioural aspects included:
  - Social engagement/withdrawal
  - Interpersonal interaction
  - Intrapersonal skills (e.g. self-esteem, coping)
  - Independence
  - General behaviour (e.g. general appearance, reality orientation)
  - Task behaviour (e.g. motivation, concentration, problem solving)
  - Group skills (group participation, etc.)
  - Activity (ADL, IADLS, etc.)
- Use of these to develop a new question to test?

# Additional Questions to the WG-ES: 3 – 4 Questions

## 1. Social functioning:

- Formal vs informal social interactions
- Interactions with strangers vs familiar people

## 2. Communication:

- Verbal fluency

## 3. Controlling behaviour:

- getting upset, conflict with others, misinterpretations, violent



# Separate Mental Health Module for use in Specialised Surveys: Identification and Description

1. More detailed on symptoms (e.g. confused behaviour, feeling of extreme highs and lows, social withdrawal, etc.) – confirm identification
2. Cover all functioning areas included on ES with additional MH questions (e.g. social interactions, communication fluency, memory and concentration – in addition to ES questions)
3. Environmental barriers:
  - **Attitudes:** family, community, professionals
  - **Support:** family, professionals, etc.
  - **Poverty:** from lack of employment, etc.
  - **Medication:** access to and side effects of

# Process

## 1. Decide on feasibility of additional measure or measures

## 2. Process of selection

- Review existing survey measures and scales
- Select and test additional measures for the WG Extended Set
- Develop new measures

## 3. Selection of a question

- Criteria for selection
- Selection
- Cognitive and field testing
- Statistical implication of adding a question or 3 – 4 questions in terms of identification of people with mental disorders.
- Establish if there are typical response profiles on WG SS and WG ES without additional MH questions

# Discussion