
Autism and Co-existing Conditions

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Autism is defined as a neurodevelopmental rather than a mental health condition — it is present from early in life, and is not an illness but a difference in the way the brain processes information. The way autism presents may vary between people and change over time, but it is regarded as a lifelong condition.

Autism spectrum condition affects the way people relate to one another and process sensory information. Autistic people tend to engage in repetitive behaviours and may have restricted interests. Where there is a good fit between the autistic person and their preferred environment, and a supportive social network, the advantages of the condition may outweigh the challenges. However, for most autistic people there are challenges to navigate — particularly in the early years when school attendance is required.

Autism spectrum condition can be present in people of any level of intellectual ability, and can co-occur with other neurodevelopmental conditions such as ADHD or developmental co-ordination disorder.

Mental health and autism

Autistic children are at increased risk of co-occurring mental health conditions. Research has found that 40% of autistic children have at least one form of anxiety disorder — 17% have social anxiety and 15% have generalised anxiety. Depression is four times more likely to occur in autistic than non-autistic children. Whilst rare, eating disorders are also more common in autistic children: approximately 20% of children with anorexia nervosa also have autism.

There are many theories as to why autistic children are at increased risk of poor mental health:

- Intolerance of uncertainty can make transitions and changes in lifestyle harder to navigate.
- Difficulty recognising internal emotions may increase vulnerability to stress.
- The sensory and social demands of school can feel overwhelming, and misunderstandings with peers can contribute to social isolation, low self-esteem, and bullying.
- Acute sensitivity to food taste, smell, and texture — or difficulty registering thirst or hunger — can increase the risk of an eating disorder.
- A need to assert control in one area (such as dietary intake) to compensate for a lack of control in another can have negative consequences.

Mental health difficulties are treatable

It is no longer assumed that mental health difficulties should simply be accepted as an unavoidable side effect of autism. Any mental health issues should be viewed as treatable. For maximum effectiveness, psychological support should be tailored to the social communication and learning strengths of the autistic child.

When is it a separate diagnosis?

It can sometimes be hard to identify mental health issues, as similar features may have always been present. For example, repetitive behaviours and intense, restricted interests are a key diagnostic feature of autism — but at what point would these behaviours meet the threshold for a separate diagnosis of obsessive-compulsive disorder? Similarly, if a child has restricted their food intake since early childhood, is that anorexia nervosa, or the avoidant and restricted food intake often seen in autism?

When in doubt, a referral to Child and Adolescent Mental Health Services (CAMHS) should be made. Professionals experienced in both mental health and neurodevelopment are best placed to make that assessment and provide support accordingly.