

3.4. Guidance on disability and mental illness

The following brief summaries, based on the work of Ombudsman Victoria, outline some of the disabilities and mental illnesses that can have an impact on a complainant's behaviour.

3.4.1. Acquired brain injury

An acquired brain injury (ABI) is any damage to the brain that occurs after birth. It can be caused by:

- traumas such as car accidents, falls or assaults
- stroke or vascular disease
- drug or alcohol use
- brain infection such as meningitis
- diseases such as dementia or tumours
- lack of oxygen, including near drowning.

The Australian Institute of Health and Welfare estimates that 1 in 45 Australians have an ABI.

The effects of an ABI vary from person to person and range from mild to severe.

They can include fatigue, memory problems, problems processing information, a shorter attention span, irritability and anger, and impulsive or disinhibited behaviour.

If you are speaking with a person with an ABI that affects their communication and comprehension, the following may help:

- Use short clear sentences and questions.
- If the person has memory problems, write down important information or repeat information regularly.
- Check that the person has understood you – ask them to summarise what you said in their own words.
- If the person has not understood, try again using different words.
- Be patient. Give the person time to process information and respond. Do not finish their sentences for them.

The following may help you if a person with an ABI exhibits challenging behaviour:

- Stay calm and keep an even tone.
- Use non-threatening hand gestures.
- Give clear, simple and immediate feedback. For example, 'I would rather you don't talk about ...'
or
'I hear you're frustrated but I don't like it when you shout at me'.
- Recognise when to disengage. It may be better to end the discussion and try again another time.

3.4.2. Autism spectrum disorders

Autism is a lifelong neurodevelopmental condition that affects the way people relate to other people and their environment. Its cause is unknown.

The Australian Bureau of Statistics estimated that there were 164,000 Australians with autism in 2015.

Autism presents differently in different people, hence the use of the word 'spectrum'. Some people with autism live independently and have families and jobs. Others have no or limited language and need lifelong support.

Autism often presents in social communication and patterns of behaviour such as:

- Difficulty interpreting verbal and non-verbal communication – such as tone of voice, metaphors or jokes. They may take what you say literally.
- Difficulty with social skills. People with autism may appear to be insensitive, or act in ways that are socially inappropriate.
- Preferences for certain routines.
- Repetitive or unusual behaviour.
- Sensitivity to certain things such as noises and light.

If you are speaking to a person with autism, the following may help:

- Use the person's name to attract their attention.
- Use short clear sentences and questions.
- Do not overload the person with information or questions.
- Ask specific rather than open questions for example, 'Did you write to X about your car? On what date?' rather than 'How have you tried to resolve this with X?'
- Avoid metaphors, sarcasm and irony.
- Consider visual information to support your communication.
- Give the person time to process what you have said and respond.
- If the person does not respond, rephrase the question.

The following may help you if a person with autism exhibits challenging behaviour:

- Stay calm and keep an even tone.
- Remove the source of discomfort if that is the cause for example, reduce noise or light.
- Tell the person what to do, rather than naming the behaviour – for example, 'Put your hands down'.

3.4.3. Intellectual disability

Intellectual disability is characterised by impairment in intellectual functioning and adaptive behaviours.

It can be caused by genetic conditions such as Down syndrome, problems during pregnancy or birth, or health problems during childhood.

The Australian Institute of Health and Welfare estimates that 3% of the population has an intellectual disability.

Intellectual disability can range from mild to severe.

It can affect the person's:

- communication – they may take longer to understand information, have difficulty with abstract concepts or instructions or have a shorter attention span
- social skills
- self-care and ability to live independently.

If you are speaking to a person with an intellectual disability, the following may help:

- Use the person's name to attract their attention.
- Use short clear sentences and questions.
- Raise one idea or question at a time.
- Avoid abstract concepts, acronyms and metaphors.
- Use body language or visual information to help you communicate.
- Consider communication aids, Easy English or other accessible communication strategies.
- Check the person's understanding – for example, ask them to repeat what you have said in their own words.
- Give them time to process information and respond.
- Allow them to take a break if needed.

3.4.4. Mental illness

Mental illness describes a group of conditions that significantly interfere with a person's thinking, emotions and/or behaviour. They include:

- anxiety disorders – such as social anxiety or post-traumatic stress disorder
- mood disorders – such as bipolar disorder or depression
- psychotic disorders – such as schizophrenia.

The Australian Bureau of Statistics estimates that 45% of adult Australians experience a mental illness in their lifetime.

The impact on an individual will depend on the type of mental illness. A person with depression may feel sad or flat, have trouble with sleep and appetite, and have impaired thinking or concentration. A person with schizophrenia may experience psychosis for example, delusions or hallucinations. A person with post-traumatic stress disorder may have intrusive memories or be anxious or irritable.

Mental illness is treatable. Some people experience it once and recover. For others it is recurring and episodic.

The effect of mental illness differs from person to person so it is best to ask the person what they need.

Consider adjustments such as giving the person more time to collect their thoughts and explain their complaint.

It is not true that people with mental illness are more violent than other people. However, mental illness is sometimes associated with behaviours that are challenging for complaint handlers.

If you are speaking with someone who says things that appear out of touch with reality – for example, that people are listening to their thoughts – you do not want to fuel a delusion or be confrontational. It is better to:

- Be respectful.
- Do not argue or tell the person they are wrong or need help.
- Acknowledge and empathise. Regardless of whether what the person is telling you is true or not, they are experiencing it as true and their distress is genuine.
- Explain that you cannot act without evidence. For example, 'You're explaining this well. We need clear evidence before we can take action though, so I don't think we can help you'.

Remember that the person may still have a legitimate complaint.

If you have other concerns about the person's behaviour:

- Talk to them calmly but firmly.
- Give clear directions for example, 'I hear you're frustrated but please stop shouting'.
- If the person does not stop, give them time to calm down somewhere they feel safe.
- If you are concerned for their safety or the safety of other people, contact the mental health unit at your nearest hospital or the police.