OASIS · AT A GLANCE

Recognizing Depression and Anxiety When Communication Is Limited

Seven observable signs that differentiate a mental health change from baseline autism traits. How to track what the adult cannot say in words, how to pursue evaluation that takes the data seriously, and how to escalate safely in crisis.

BY JIM PALASTY · OASIS FOR AUTISM · 9 MIN READ

7

OBSERVABLE SIGNS

Sleep, appetite, withdrawal, energy, skills regression, vocalization, self-injury. Seven sign categories worth tracking. Change from baseline is the diagnostic signal.

How it works

THREE STEPS

Know the typical pattern

Without a baseline, change cannot be detected. Document what is normal for the adult across the seven sign categories first.

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Log the change from baseline

Two to four weeks of structured observation. The change in pattern, not the absolute level, is what tells the clinician what is happening.

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Evaluation + safe escalation

A psychiatrist who works with autistic adults. A crisis plan with named hospitals, mobile crisis numbers, and rescue medications if prescribed.

Seven sign categories worth tracking

Sleep	Bed time, wake time, awakenings, daytime nap pattern
Appetite	Food intake amount, preferences shifts, refusal patterns
Withdrawal	Interest in activities, eye contact change, social participation
Energy	Activity level, lethargy, pacing or restlessness
Skills	Loss of previously stable skills (toileting, dressing, AAC use)
Vocalization	New sounds, distress vocalizations, silence where speech was
Self-injury	Frequency, intensity, new locations, new behaviors

WHAT IT LOOKS LIKE

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She stopped getting on the school bus. For nineteen years she had gotten on every day she was supposed to. We were three days from giving up and telling the program she had aged out. The behavior team came over and asked us to log everything for two weeks. Sleep was down to four hours. She had stopped using two of her three favorite toys. She was crying more than she had in five years. The psychiatrist diagnosed major depression. Sertraline. Eight weeks later she got back on the bus.

VIVIAN, HOLLAND

What matters, at a glance

"It's part of the autism" dismissal

Many depressive and anxiety presentations in autistic adults with limited communication are dismissed as autism baseline. Diagnostic overshadowing is the technical term. Documentation of change-from-baseline is the remedy.

Change is the signal

Depression and anxiety in adults with limited communication usually present as changes in observable patterns, not as new behaviors. Track the change, not the absolute level.

Seven sign categories

Sleep, appetite, withdrawal, energy, skill loss, vocalization change, self-injury frequency. The Charlot et al. and DM-ID frameworks document these categories. Track all seven.

Crisis escalation

988 Suicide and Crisis Lifeline includes mobile crisis dispatch in many regions. ER is the next step for imminent risk. Some regions have dedicated developmental disability crisis teams worth identifying in advance.

Find an evaluating clinician

Psychiatrists trained in dual diagnosis (autism + mental health) or in the DM-ID-2 diagnostic framework. The standard psychiatric interview alone underdiagnoses this population. The behavior log is what gets the evaluation right.

Rule out medical first

GI distress, pain, sleep apnea, thyroid, infection, medication side effects. All can mimic depression or anxiety. Medical workup precedes psychiatric diagnosis when possible.

BRING THESE · CHECK AS YOU GO

- [ ] Baseline documentation complete
- [ ] Medical workup scheduled or completed
- [ ] Crisis plan written and posted
- [ ] Rescue medication protocol (if prescribed)
- [ ] Two-to-four-week change log started
- [ ] Dual-diagnosis psychiatrist identified
- [ ] 988 number programmed in family phones

YOUR MOVE

From "something is wrong" to safe evaluation

1. Document baseline across the seven sign categories. One paragraph per category.
2. Track changes for two to four weeks using a structured log shared between household and any external program.
3. Schedule a medical workup first to rule out GI, sleep apnea, thyroid, infection, or medication side effects.
4. Once medical is cleared, schedule a psychiatric evaluation with a clinician trained in dual diagnosis or DM-ID-2.
5. Build a written crisis escalation plan: 988, mobile crisis, ER, rescue medications, named contacts.

Depression and anxiety are treatable in autistic adults. Misrecognition as "behavior" or "baseline autism" delays treatment by months or years. The log is what shortens the delay.

RESOURCES NAMED IN THIS POST

oasisforautism.com · https://oasisforautism.com

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ABOUT THE AUTHOR

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