

Study Finds Psychiatry Training On Developmental Disabilities 'Insufficient'

by Michelle Diament | March 13, 2023



New research finds that psychiatry training programs devote little time to teaching about treating those with autism and intellectual disability.

Psychiatrists are often some of the main providers of care for people with autism and intellectual disability, but new research finds that many of these specialists have little training to meet the needs of this population.

The directors of psychiatry residency programs across the country report that their trainees receive relatively few hours per year of training in autism and intellectual disability and are exposed to a limited number of patients with these conditions.

The findings [published](#) recently in the journal *Autism* come from a study based on surveys of 78 leaders at 83 accredited psychiatry training programs in 2019. They included 46 programs focused on child and adolescent psychiatry, 33 for general psychiatry residents and two pediatric programs.

Nearly half of child and adolescent psychiatry programs reported that trainees received four to six lecture hours per year on autism. About a third said residents saw 11 to 20 outpatients on the spectrum per year and a similar number of inpatients with the conditions, while trainees in most remaining programs saw fewer.

Residents in general psychiatry programs had even less exposure to training on autism or patients with such diagnoses, the study found.

Intellectual disability training for child and adolescent as well as general psychiatry programs most often involved one to three lecture hours per year. About 40% of psychiatry residents in both types of programs saw one to five outpatients per year, but the number of inpatients varied by specialty.

The research follows up on a similar study from 2009, which found that many psychiatry residents received as little as three to four lecture hours per year on autism and intellectual disability and saw one to five patients with such diagnoses in clinical settings annually.

Limited knowledge of autism and intellectual disability has consequences, the authors of the latest study note, leading psychiatrists to rely overly on medication and physical restraint while underutilizing behavioral therapies.

“Psychiatry training in ASD/ID continues to be insufficient in many (child and adolescent psychiatry) and (general psychiatry) programs. Deficits in training may be associated with diminished future interest in serving these patients, perpetuating significant barriers to mental health care in ASD/ID,” concluded Natasha Marrus, an assistant professor of psychiatry at the Washington University School of Medicine, and her colleagues.