



Supporting adults with mental health conditions

Many adults with mental health conditions have unidentified speech, language and communication difficulties and swallowing needs. Speech and language therapy identifies and provides support for these needs. Speech and language therapy supports people to express their wishes and preferences, to participate in decisions about their care and treatment and to engage in psychological interventions. This supports and maintains better health and wellbeing, prevents relapse and promotes recovery in mental health.

Links between language, communication and mental health

Language and communication breakdown has been recognised as an important part of mental health, both in terms of diagnosis and pathology¹. Even if someone has no existing speech, language and communication difficulties, a chronic or acute mental health episode can impair someone's communication. Additionally, people can present to mental health services with existing difficulties with communication that are secondary to their mental health diagnosis. These conditions include dementia, depression, learning disability, psychosis and schizophrenia.

The size of the issue

- **80%** of people showed impairment in language and **60%** of people had an impairment in communication in one acute psychiatric inpatient unit².
- **Over 30%** of people in a mental health population showed signs of dysphagia³, which is significantly higher than the general population⁴.



Gordon's story

Gordon was supported by community mental health services who noticed Gordon was beginning to disengage and not attend regular appointments; there were also some complaints being received from his neighbours suggesting that Gordon may be experiencing a period of acute psychosis. The mental health crisis team attended Gordon's supported accommodation which resulted in Gordon being detained under the Mental Health Act 1983. Gordon was transferred to a locked-door high dependency inpatient service. Whilst admitted into the service, the team identified that Gordon may have some speech, language and communication difficulties and requested input from speech and language therapy. The speech and language therapist completed a baseline assessment and identified that Gordon had difficulty understanding and using complex language coupled with auditory processing deficits and working memory impairments. Working collaboratively, a range of recommendations were implemented to aid Gordon's ability to listen, process and retain key information to support him in making appropriate decisions for community discharge. These recommendations involved making reasonable adjustments to communication approaches and increasing the use of visual materials for activities of daily living. On discharge from inpatient services, the speech and language therapist completed a training session with Gordon's case worker and care coordinator to ensure effective longer-term management of his identified communication needs.

How language and communication impact on mental health

- Communication difficulties are a barrier to accessing and engaging in rehabilitation and psychological programmes, which are often delivered verbally and are thus reliant on people's language skills. Unmet needs impact on recovery and length of stay in mental health settings⁵.
- Unsupported communication needs can be a barrier to a person expressing their health needs to a health professional or carer⁶ during initial assessment, diagnosis, treatment and care planning.
- Assessments of capacity to consent to treatment, or to make decisions which involve management of risk, are compromised if the person has unidentified or unmet communication needs⁷.
- Inaccurate assessments risk excluding people from decision-making or asking people to make uninformed decisions⁸.
- Communication difficulties create a barrier for people with complex mental health, and support and resources are required to ensure effective engagement⁹.
- Gaining timely access to healthcare services often requires a high level of health literacy¹⁰.
- People with communication difficulties are likely to have problems accessing and understanding information about their health and less likely to be engaged in active discussions about their own healthcare, leading to their needs being unidentified¹¹.
- People being cared for in seclusion or segregation are more likely to have complex communication needs or communication that others find challenging¹².
- People with communication difficulties may struggle to express their emotions and distress, which can lead to their behaviour being misinterpreted as challenging. This can result in restraint and escalation in hands-on intervention¹³.
- Communication skills are recognised as a protective factor in determining good mental health¹⁴.
- People with communication difficulties and mental health needs often have less understanding of, and insight into, managing and maintaining their own mental health, resulting in barriers to rehabilitation and recovery¹⁵.
- Speech, language and communication difficulties can create a barrier to social opportunities¹⁶ and prevent timely recovery.



In its submission to the Migration Advisory Committee's Full Review of the Shortage Occupation List, the Department of Health and Social Care argued that speech and language therapists should be added to the Shortage Occupation List because the profession is facing a range of pressures including increasing demand, in mental health in particular¹⁷.

How swallowing needs impact on mental health

- There is a greater prevalence of eating, drinking and swallowing difficulties (dysphagia) in acute and community mental health settings when compared to the general population.
- Adults with mental health problems have higher rates of dysphagia and choking due to factors such as medication side effects¹⁸.
- The risk of death due to choking has been reported as 30 times more likely in people with schizophrenia than in the general population¹⁹.
- Adults with concurrent neurological disorders and behavioural changes have an increased risk of swallow difficulties²⁰.
- Dysphagia, if left unidentified and unsupported, can result in dehydration, malnutrition, choking, aspiration and hospital admissions²¹.

Why do we need to invest in SLT in mental health services?

Speech and language therapy contributes to differential diagnosis and identifies and supports both communication and swallowing needs.

Speech and language therapy:

- Supports people to develop or maintain appropriate and effective communication.
- Enables people to make informed choices about their own care and treatment, ensuring that their communication is supported so their wishes and preferences sit at the heart of decision making.
- Promotes accurate assessments, ensuring that communication issues are acknowledged in all health and care decisions and treatment options.
- Supports the person to communicate their health concerns to ensure accuracy of referral to other services.
- Advises on what adjustments are required to make all verbally mediated psychological interventions, including group based work, accessible to promote better engagement.
- Supports people to gain a better insight into their illness, as required under the Mental Health Act, to enable them to be discharged from inpatient settings.
- Produces information in a format that is accessible and allows meaningful discussion.
- Supports other staff on how best to communicate with an individual, ensuring that materials are tailored to the specific communication needs of the individual person.
- Establishes safe and effective eating, drinking and swallowing, facilitates adequate nutrition and hydration and reduces the risk of choking and aspiration pneumonia through direct intervention and training others. This helps to prevent unnecessary hospital admission and can reduce the length of stay.

NHS England's service specification for low and medium secure mental health services highlights that for specialist learning disability secure services:

"The Multidisciplinary Team must include appropriately trained speech and language therapists"²².





Recommendations

In order to support better outcomes for adults accessing mental health services, the Royal College of Speech and Language Therapists recommends that:

1. Speech and language therapists should be recognised as part of the core mental health workforce.
2. Speech and language therapists should be embedded in all relevant mental health services
3. The wider workforce should receive training on the links between communication needs and mental health.
4. Funding should be made available to research the impact of speech and language therapy input on people's mental health.

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► For further information, please contact info@rcslt.org

Also see our factsheet on **children and young people's mental health services**.

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