

ADULT MENTAL HEALTH AND SPEECH & LANGUAGE THERAPY



Speech, language, communication and swallowing problems are often associated with mental ill health in adults. Speech and language therapy supports people to maintain better health and wellbeing, prevent relapse and promote recovery in mental health.

COMMUNICATION & MENTAL HEALTH

Chronic or acute mental ill health can impair a person's communication. Changes in communication can sometimes be a symptom of mental ill health. Speech, language or communication needs may be secondary to a mental health diagnosis, for example, dementia, depression, psychosis or schizophrenia.



The size of the problem

- People with a primary communication problem are at greater risk of experiencing mental health problems than their peers, commonly anxiety or depression.
- Research among patients in an acute psychiatric inpatient unit showed 80% of patients presented with impaired language.¹

Case Study

Mr A was dissatisfied with his treatment on an acute mental health inpatient ward. He regularly voiced concerns to staff, which led to often challenging situations for both the patient and staff. Staff were providing the appropriate care and could not understand Mr A's ongoing frustrations. After the SLT spent time with Mr A, it was clear that auditory memory was an issue. Mr A could not easily recall or retain information communicated verbally. The SLT devised a more effective communication strategy for Mr A, with staff providing written details about each visit. Following this intervention, interactions between Mr A and staff improved and this reduced frustration and conflict.²

"Barriers to access mental health services remain, particularly for some marginalised groups who are considered to be at higher risk of mental ill health. This may be due to social exclusion or isolation, communication needs and barriers or they may be in some way stigmatised by society".

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EATING, DRINKING, SWALLOWING & MENTAL HEALTH

Mental ill health can impact on safe eating, drinking and swallowing. This may be as part of a mental health diagnosis, a behaviour or side effect of medication.

- There is a greater prevalence of dysphagia in acute and community mental health settings compared to the general population.³
- People with a diagnosis of schizophrenia, are 30 times more likely to die from choking than the general population.⁴
- Dysphagia, if left unidentified and unsupported, can result in dehydration, malnutrition, choking, aspiration and hospital admissions.⁵

Case Study – quote from service user

"I was not eating properly because of swallowing problems due to my new antipsychotic medications and so I lost weight. The Speech and Language Therapist (SLT) came along and advised a Level 5 / Minced diet and suddenly I could eat a full meal again! My weight has started to increase and I'm back to eating almost normal foods again. The Occupational Therapist and Physiotherapist have also helped me get back to normality, but the major impact was the SLT. The other things wouldn't have changed if I couldn't have eaten full meals."

THE VALUE OF SLT SERVICES

Speech and language therapy

- Provide support to ensure people can understand their diagnosis and treatment options, express their views and access talking therapies as part of their care.
- Increase safety by reducing the risk associated with swallowing problems. These can lead to malnutrition, dehydration, choking, or aspiration pneumonia requiring hospital admission and, in some cases, causing death.
- Support cost efficiencies in mental health services by avoiding inappropriate language-based treatments.
- Improve access to verbally mediated interventions and talking therapies which require significant understanding and expressive language skills.
- Support other professionals to recognise and respond to communication and swallowing needs. Including how to tailor information to support decision-making and discuss treatment options.



ACTION 32. Undertake a comprehensive workforce review considering existing workforce need, training and development of new workforce, such as allied health professions.

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RCSLT NI RECOMMENDS



Adopting an early identification and intervention approach to recognise and respond to people's communication and swallowing needs by:

- **Commissioning** – dedicated SLT posts as part of multidisciplinary adult mental health services to meet their needs.
- **Training** – provide multidisciplinary training to improve awareness of the links between mental health and communication and swallowing utilising scale and spread of existing SLT projects.
- **Workforce development** – consider undergraduate, post graduate and funded professional development training to grow and support a sustainable workforce of SLTs specialising in mental health in NI.

1 Walsh, I., Regan, J., Sowman, R., Parsons, B. and McKay, A.P., 2007. A needs analysis for the provision of a speech and language therapy service to adults with mental health disorders. *Irish journal of psychological medicine*, 24(3), pp.89-93

2 SLT, *Acute mental health in-patient service*, NI

3 https://www.rcslt.org/wp-content/uploads/media/RCSLT_AMH_A4_4pp_DIGITAL_book.pdf

4 D. Ruschena, P. E. Mullen, s. Palmer, P. Burgess, S. M. Corder, O. H. Drummer, C. Wallace and J. Barry-Walsh, 2003. *Choking deaths: the role of antipsychotic Medication*, *British Journal of Psychiatry*

5 For more on dysphagia see the RCSLT factsheet accessible on www.rcslt.org/wp-content/uploads/media/Project/RCSLT/rcslt-dysphagia-factsheet.pdf

6 SLT, *Acute mental health in-patient service*, NI