



Domestic Abuse Bill

Report Stage briefing – March 2021

Amendment 92

Executive summary

The Government's comments during Committee Stage on the importance of speech, language and communication needs, how they can act as a barrier to accessing support, and its commitment to consider how the issues can be properly addressed in guidance are very welcome.

Amendment 92 provides an opportunity for the Government to set out how it proposes to do that, both in the draft statutory guidance to the Bill (the *Draft Statutory Guidance Framework*¹ published in July 2020), the separate guidance for local authorities relating to the exercise of their functions under Part 4 of the Act that will be published in due course and any other guidance it issues on domestic abuse.

References to speech, language and communication needs and the role of speech and language therapists in supporting people experiencing domestic abuse, their children and the professionals working with and supporting them, might usefully be inserted in the following chapters in the *Draft Statutory Guidance Framework*:

- Chapter 2 Understanding Domestic Abuse
- Chapter 3 Impact on Victims
- Chapter 4 Agency Response to Domestic Abuse
- Chapter 5 Commissioning Response to Domestic Abuse
- Chapter 6 Working Together to Tackle Domestic Abuse

In recognition of the impact of experiencing and witnessing domestic impact on children and young people's speech, language and communication, and the negative long-term impact that can have, I CAN, the children's communication charity, has now joined the Royal College of Speech and Language Therapists in supporting this amendment. The Association of Youth Offending Team Managers has also joined in support of the amendment.

Context of Amendment 92

1. It was very welcome to hear the Government recognise the importance of these issues, during the Bill's Committee Stage, particularly that:
 - the ability to communicate is a crucial life skill;
 - early speech and language is an important protective factor for a child's health and development;
 - those facing communication barriers are, arguably, some of the most vulnerable victims of domestic abuse, given the added difficulties that they have when it comes to speaking out or asking for support;
 - it is committed to ensuring that victims of domestic abuse and their children get the right support to meet their individual needs; and
 - it intends to make clear that local authorities should consider additional barriers that might prevent victims with protective characteristics accessing support in refuges and other safe accommodation services;

2. It was also very welcome to hear the Government say that:
 - these matters can be further addressed in the statutory guidance; and
 - it will consider how the issues can be properly addressed in the guidance issued.

3. This amendment provides the opportunity for the Government to set out how it proposes to do that so that any relevant guidance ensures appropriate support for people experiencing domestic abuse, their children and the professionals working with and supporting them need.

4. Amendment 92 has four aspects designed to ensure that guidance highlights:
 - the links between domestic abuse and speech, language and communication needs;
 - the impact of witnessing domestic abuse on children's speech, language and communication;
 - the services available to support people with speech, language and communication needs who are experiencing domestic abuse and their children; and
 - how support provided by local authorities can be made inclusive and accessible to people with speech, language and communication needs.

Sam and Jane's story

Sam and Jane's story shows why this matters.

Sam was a 10-year old boy who came into contact with a speech and language therapist through youth offending services. He had been excluded from school after stabbing a fellow pupil, was in the process of being taken into care and was also at risk of becoming a perpetrator of domestic abuse himself, being violent towards his mother, Jane. Jane had also been the victim of significant domestic abuse by her husband and finally fled to a refuge after Sam had been physically abused by his father.

On assessing Sam, the speech and language therapist discovered that although he had a near average spoken vocabulary for his age, he could not form more than the most simple of sentences. Sam had a severe Developmental Language Disorder previously unrecognised. He was not able to form complex sentences, which affected his ability to think through the consequences of his actions. Sam was not able to take in spoken information, his knowledge of words was severely impoverished and he was not able to read at the level expected for a child of his age.

In partnership with the family practitioner, the speech and language therapist worked with Sam and Jane. It soon became clear that Jane herself had significant communication needs which resulted in a significant emotional vacuum between her and Sam. She was not able to see life from Sam's point of view, nor able to make him feel that she did.

Working with the family practitioner, the speech and language therapist helped develop Jane's communication skills in addition to Sam's. This helped close the vacuum between them. Sam was not taken into care and he was able to return to mainstream education.

The links between domestic abuse and speech, language and communication needs

5. It is very welcome that the Government recognise that those facing communication barriers are, arguably, some of the most vulnerable victims of domestic abuse, given the added difficulties that they have when it comes to speaking out or asking for support.

6. We know that speech, language and communication needs are a vulnerability and domestic abuse risk factor in their own right.
7. They are also highly prevalent – often hidden and unidentified - in some of the other vulnerabilities and domestic abuse risk factors, including mental health, substance misuse, literacy difficulties, learning disability, brain injury, neurodiversity, cognitive issues, and homelessness.
8. On mental health, for example:
 - one study found that 80% of people accessing mental health services had an impairment in language and over 60% had an impairment in communication and discourse.ⁱⁱ
 - children with a mental health disorder report having speech or language problems five times more than those without;ⁱⁱⁱ and
 - 81% of children with social, emotional and mental health needs have significant unidentified language deficits.^{iv}
9. Similarly, on homelessness:
 - Communication needs are highly prevalent amongst rough sleepers and significantly greater than for the UK general population - Botting & Andrews have found a prevalence rate amongst homeless people of 17.1% compared with 10% in the general population.^v
10. It is also important to note that some perpetrators of domestic abuse may also have speech, language and communication needs which may have been previously unidentified and unsupported.
 - A speech and language therapist working in a CAMHS has reported working with young people who have been the perpetrators in adolescent to parent violence and abuse.
 - Another speech and language therapist has reported working with an adult perpetrator who had significant communication needs.
11. Including references to speech, language and communication needs in the Bill's statutory guidance would help to ensure that this issue can be properly addressed so some of our most vulnerable people can access the support they need.

How guidance can be strengthened

The *Draft Statutory Guidance Framework* might be strengthened by specifically referencing speech, language and communication needs in the following ways:

- ***Chapter 2 - Understanding Domestic Abuse***
 - Referring to speech, language and communication needs as a separate and specific intersectionality.
 - Inserting in Paragraph 58 that they are one of the barriers to people leaving.
 - Inserting in Paragraph 79 that they are one of the specific impairments that may result in people experiencing abuse.
- ***Chapter 4 - Agency Response to Domestic Abuse***
 - Inserting in Paragraph 178 that they are a specific vulnerability and a barrier to disclosing information and seeking support.
- ***Chapter 5 – Commissioning Response to Domestic Abuse***
 - Inserting a reference in Paragraph 232 that they are one of the diverse needs to which local strategies and services have to respond.
 - Inserting a reference in Paragraph 247 that they are an additional barrier that people experiencing domestic abuse face.

The Government could also usefully commit to ensuring that the national statement of expectations, which is due to be published later this year, references speech, language and communication needs.

Danny's story

Danny had received a community court order for an aggressive episode involving his partner and family. He had not been in trouble with the police before and was generally regarded as well-liked on his college course and with his friends. He was referred to the Speech and Language Therapist within the Youth Offending Team due to concerns around his expressive language.

Assessment showed that whilst Danny could engage well in surface level conversation, he struggled with emotional vocabulary and expressing his opinions in a non-aggressive style. Danny shared that he had learnt this aggressive style from observing his parents growing up.

Sessions were conducted initially with Danny on his own working on emotional vocabulary (understanding and use) and how to share what he was feeling and thinking using an

assertive communication style. Danny and his partner also requested that sessions be conducted jointly so they could practice key topics and how Danny can safely share his thoughts and feelings.

The outcome was that both Danny and his partner felt they had improved communication and could move forward with their lives.

The impact of witnessing domestic abuse on children's speech, language and communication

12. It is very welcome that the draft guidance currently includes a specific reference to special educational needs and disabilities, but this is not sufficient.
13. Some speech, language and communication needs are the result of a lifelong condition or disability (some 10% of children and young people can have these); but speech, language and communication needs can also be the result of environmental factors. For instance, in areas of social disadvantage up to 50% of children can start school with delayed language or another identified communication need.
14. Such are often overlooked or unidentified.
15. We know that witnessing domestic abuse impacts on children's speech, language and communication.
16. Speech and language therapists working with vulnerable children and young people – for example, in services for children in care, children in need, those at risk of permanent exclusion or at risk of involvement in youth justice services – report that large numbers of those children and young people have also experienced or witnessed domestic abuse.
 - One speech and language therapy service alone reports 58% the children and young people on its caseload has witnessed or experienced domestic abuse.
17. Including specific references to speech, language and communication needs in the Bill's statutory guidance would help ensure better support for children and young people who have experienced or witnessed domestic abuse.

How guidance can be strengthened

The *Draft Statutory Guidance Framework* might be strengthened by specifically referencing speech, language and communication needs in the following ways:

- **Chapter 3 – Impact on Victims**
 - Inserting a reference in Paragraph 114 that deterioration in speech, language and communication can be a potential impact of experiencing or witnessing domestic abuse.
 - Inserting a reference in Paragraph 115 after the reference to special educational needs and disabilities to ensure that environmental speech, language and communication needs are covered.
 - Inserting references in Paragraphs 116 and 117 to academic research in this field.

Faisal's story

Faisal was taken into care as a young teenager after observing domestic abuse between his parents for years. At the age of 15 years, Faisal's social worker wished to commence life story work with Faisal.

Speech and language assessment had shown that Faisal had a language disorder associated with learning difficulties and attachment difficulties. The social worker and speech and language therapist worked together using Talking Mats and narrative grids to devise a method for Faisal to construct his life narrative in an accessible format.

The outcome was that Faisal was able to more successfully access the life story sessions after previously finding it difficult and disengaging with the work.

The services available to support people with speech, language and communication needs who are experiencing domestic abuse and their children

18. It was very welcome to hear the Government say during Committee Stage that it is committed to ensuring that victims of domestic abuse and their children get the right support to meet their individual needs.

19. To ensure that happens a whole range of different professionals will need to be involved in domestic abuse services so individual needs – which are often multiple, complex and inter-linked – can be identified and appropriate support can be given to those individuals and to the other professionals working with them.
20. For those with communication needs, speech and language therapy services can play an important role in supporting people who have experienced domestic abuse, their children and the professionals working with and supporting them. This can be through helping to ensure that:
- any communication needs that people who have experienced domestic abuse, their children and the perpetrators of domestic abuse have are identified;
 - communication barriers to referrals, risk assessments, support programmes, and for perpetrators preventative and rehabilitative sessions, are removed; and
 - training is provided to professionals in communication needs, how they present, and how to adapt assessments and interventions to ensure that those with communication needs can access and benefit from risk assessments and support services, and to know when specialist involvement from speech and language therapy would be beneficial.
21. To help increase awareness of how speech and language therapists can contribute to domestic abuse services it would be very helpful if the statutory guidance referred to them as one of the professions that has a role to play in securing better outcomes for people who have experienced domestic and their children and in helping prevent domestic abuse by contributing to work with perpetrators.

How guidance can be strengthened

The *Draft Statutory Guidance Framework* might be strengthened by specifically referencing speech and language therapy services in the following ways:

- ***Chapter 3 – Impact on Victims***
 - Inserting a reference in Paragraph 115 that speech and language therapists can support professionals to ensure children and young people are able to communicate in a way that suits them best.
 - Inserting a reference in Paragraph 118 that speech and language therapy services may be a relevant service for the perpetrator.

- Inserting a reference in Paragraph 120 to speech and language therapy being one of the specialist services that might be able to support children and young people.
- **Chapter 4 – Agency Response to Domestic Abuse**
 - Inserting a reference in Paragraph 144 to speech and language therapists being one of the relevant practitioners to consider when assessing children.
 - Inserting a reference in Paragraph 150 that the health professionals might include relevant therapists.
 - Inserting a reference in Paragraph 160 to health professionals including other specialist health services, including therapeutic ones.
- **Chapter 5 – Working Together to Tackle Domestic Abuse**
 - Inserting references in various parts of Paragraph 247 to speech and language therapy services being one of the specialist services that can identify barriers, that they can be one of the embedded or readily available specialist agencies and they can provide training on the links between communication needs and domestic abuse to frontline domestic abuse professionals.
 - Inserting a reference in Paragraph 249 that the core agencies Multi-agency Risk Assessment Conference (MARAC) include specialist health services, including speech and language therapy services.

How support provided by local authorities can be made inclusive and accessible to people with speech, language and communication needs

22. It was very welcome to hear the Government acknowledge in Committee that:

- local authorities' strategies will be published in line with the Public Sector Bodies (Websites and Mobile Applications) (No. 2) Accessibility Regulations 2018; and
- local authorities will also want to ensure that the information they provide is accessible in other formats for people unable to use websites or mobile devices, including providing information in languages other than English to reflect their local population.

23. While this is welcome, it is not sufficient.

24. From their experience of working with people who have experienced domestic abuse, their children and the perpetrators, speech and language therapists have reported that various domestic abuse risk assessments and forms of support may not always be accessible to those with communication needs.
25. This is especially the case where risk assessments and support may be verbally mediated. These very often rely on a high level of understanding, expression, the retention, processing and weighing of information, narrative skills, and the ability to name and understand emotions.
26. These can be the very things that people with communication needs struggle with, especially at times of stress.
27. This may result in risk assessments being inaccurate and support being inaccessible. For perpetrators, it may mean rehabilitation and prevention programmes fail.
28. Recalling their previous experience of working in domestic abuse services prior to their training in speech and language therapy, one speech and language therapist has reflected that several of the individuals they worked with who had a learning disability were experiencing abuse. It was clear that these individuals were at greater risk, as a direct result of difficulty communicating their circumstances and understanding the advice and assessment they were being offered. What was not so clear was how those barriers could be overcome. Looking back now, the speech and language therapist can see what speech and language therapy input might have been able to achieve, not only in removing those communication barriers, but also in supporting them and other professionals to recognise communication needs, the barriers they represent and to know how to differentiate assessments and support accordingly, as well as provide speech and language therapy support to those people who needed it.

How guidance can be strengthened

The *Draft Statutory Guidance Framework* might be strengthened by specifically referencing accessible information and inclusive communication in the following ways:

- ***Chapter 2 - Understanding Domestic Abuse***

- Inserting a reference in Paragraph 81 to ‘accessible information’ and ‘inclusive communication’ as ways of overcoming some of the barriers faced by disabled people.
- Inserting a reference in Paragraph 105 that any alcohol or drug treatment programme for perpetrators may need to be adapted to be accessible to perpetrators who have speech, language and communication needs.
- **Chapter 4 – Agency Response to Domestic Abuse**
 - Inserting a reference in Paragraph 125 to highlight that, although the Domestic Abuse, Stalking and Harassment (DASH) risk assessment does not list speech, language and communication needs as a specific vulnerability, they should be regarded as such and the DASH risk assessment – and any other form of risk assessment - should be provided in adapted format (for example, Easy Read) so that people with speech, language and communication needs are able to understand what is being said to and asked of them.

The Government could also usefully commit to ensuring that any future domestic abuse risk assessments and support follow Plain English guidelines and are produced in a range of accessible formats to ensure they are as inclusive as possible to those with speech, language and communication needs.

For more information, please contact: peter.just@rcslt.org

References

- ⁱ The *Draft Statutory Guidance Framework* published in July 2020 is accessible here: https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/896640/Draft_statutory_guidance_July_2020.pdf
- ⁱⁱ Walsh, I. et al. (2007). A needs analysis for the provision of a speech and language therapy service to adults with mental health disorders. *Ir J Psych Med* 24(3): 89-93.
- ⁱⁱⁱ NHS Digital. (2018). *Mental Health of Children and Young People in England, 2017*. <https://files.digital.nhs.uk/42/9E0302/MHCYP%202017%20Multiple%20Conditions.pdf>
- ^{iv} Hollo, A. et al. (2014). Unidentified Language Deficits in Children with Emotional and Behavioral Disorders: A Meta-Analysis. *Exceptional Children* 80(2): 169-186.
- ^v Botting, N. & Andrews, L. (2020). The Speech Language and Communication Needs of Rough Sleepers in London. *International Journal of Language and Communication Disorders*. <https://openaccess.city.ac.uk/id/eprint/24781/>