Talk is Cheap!
The Role of a Speech Pathologist in a Mental Health Service

Mary Woodward
Senior Speech Pathologist
Concord Centre for Mental Health, Sydney
Tools of Appropriate and Effective Communication

Other Factors Affecting Communication

- Speech (mode of communicating)
- Pragmatics (rules of social communication)
- Language (receptive/expressive)

Factors:
- Mental State
- General Environment
- Personality
- Physical Health
- Specific Situation
- Other People
- Confidence
- Mood/Feelings
- Confidence

Other Factors Affecting Communication
(slide courtesy of Emma Kay-Dominey, SLT, Rampton Hospital)
Effect of Communication Difficulties:

Short Term:

• Difficulties in expressing basic needs at times
• Difficulties in expressing emotions in effective, appropriate manner
• Engage in communication styles which are actively destructive during day-to-day interactions
• Others overestimate language abilities, leading to misunderstanding and frustration
• Difficulties in working in group settings
• Barriers to verbally mediated therapies due to reduced comprehension/expressive language skills
Effect of Communication Difficulties (cont.):

Long Term:
- For some can be seen to directly relate to offending behaviour (indirectly in others)
- Likely to reduce opportunities to establish effective, supportive and positive social networks (within and outside hospital)
- Cause difficulty in establishing and sustaining meaningful relationships
- Difficulties with maintaining employment and social activities
Is there a Need for Speech Pathology?

- Nearly 65% of psychiatrically referred population had some sort of communication disorder (Love and Thompson 1988).

- A high profile study in 1996 (Emerson and Enderby) found the prevalence of communication disorders in a mental health service to be 75%.

- Within a mental health population, 32% of those assessed demonstrated overt signs of dysphagia:
  - 35% in an inpatient unit,
  - 27% attending the day hospital
  - 31% attending long-term care settings (Regan et al 2006).

Common Conditions within Mental Health Services

- Schizophrenia
- Mood/Affective Disorders
- Intellectual Disabilities
- Personality Disorders
- Autistic Spectrum Disorders
**Associated Communication Difficulties**

- Social communication and relationship difficulties
- Expressive language difficulties
- Receptive language difficulties
- Limited emotional awareness
- Difficulties understanding/using non-verbal communication
- Reduced attention and listening skills
- Disconnection between semantic, affective, and cognitive components of language (Cleckly, 1976; Hare, 1996, Louth et al, 1998; Dadds et al, 2009)
- Verbal reasoning difficulties
- Difficulties considering other person’s perspective
- Disorganised speech
- Possible problems with fluency, voice, articulatory disorders from childhood
How do services exacerbate these difficulties?

- Differential diagnosis
- Staff changes
- Inconsistency between staff
- Interacting with a large group of staff and peers
- Reliance on group-work
- Verbally mediated interventions
So what does a Speech Pathologist do?!
“The Speech and Language Therapist’s core responsibility is to ensure each patient has the opportunity to develop and/or maintain appropriate and effective communication”

(Emma Kay Dominey, SLT, Rampton Hospital, 2009)
What the patients say...

- “guide service users in an appropriate manner within the community”
- “help with communication skills”
- “Mary is here to make sure that you can understand the world”
- “teach you appropriate speech and language skills. Work about autism, expressions and things”
- “talk about ASD – communication, imagination and relationships. Idioms. If we don’t understand something, explain it, break it down.”
- “question things – ways of thinking”
- “to work on issues of communication both verbal and non-verbal. Also issues around swallowing”
- “helps me talk”
- “by listening to us and challenging our opinions & actions”
- “learn to interact with people differently”
“It is the position of Speech Pathology Australia that assessment, diagnosis and treatment of individuals with or at risk of mental health conditions are within the scope of practice of speech pathologists and as such the Association strongly recommends that speech pathologists be recognised as essential service providers in the management of mental health conditions.”
Communication Assessment

• Receptive Language Skills
• Expressive Language Skills
• Intelligibility
• Voice
• Fluency
• Non-verbal communication
• Social communication
Contribution of SP Assessment to the MDT

- Assist in differential diagnosis
- Identify specific communication problems
- Establish a baseline measure
- Enhance client insight

(France & Muir, 2000)
Contribution to MDT Intervention

- Collaborative Working: joint assessment, joint treatment, adapt intervention programmes

- Optimising impact of treatment (RCSLT, 2007)

- Greater satisfaction (Edber, 1994; Walsh et al 2007)

- Facilitating understanding of patient (Orr, 2001)

- Reduction in medication dosage (Dobson, McDougall, Busheikin & Aldous, 1995)

- Developing patients’ skills such as expression, comprehension, pragmatics, verbal reasoning, self-awareness and confidence in communication in individual and/or group sessions.
Other Aspects of the SP Role

- Facilitate communication between patients and peers, staff, families, other professionals and the wider community.
- Providing advice and training to other staff to ensure that the patients’ environment is modified in order maximise effective communication.
- Ensuring information (rights, timetables, other intervention programmes, etc.) is presented in a way that is meaningful to each individual.
- Developing patients’ communication skills in individual and/or group sessions.
- Attending case reviews, clinical team meetings, clinical governance meetings etc.
Case Example

- Mark, aged 55
- Looking for a wife
- Slow information processing
- Difficulty expressing ideas verbally
- Literal interpretation of language
- Limited awareness of danger
- Limited understanding of how to form relationships
- Coprophilia
What is Treatment?

People are in hospital so they can get treatment.

The kind of treatment they get, depends on what problems they’ve had.

Some people need medication.

Other people need different types of treatment.

This might be working with:
  • Psychology
  • Speech and Language Therapy
  • Occupational Therapy
  • Education
  • Nursing staff

When I’ve finished my assessments, the team will decide what type of treatment I need.

So far, the team do not think I need medication.

They want me to carry on working with the therapists and nursing staff.

This is the best way for me to make progress.
He said “not in my area” so it must be OK in other areas.

I’m worried he’ll harass other children. He needs to stop.
Alright? what can I get ya?

Pint please

What type of relationship do these two people have? How do you think they know each other?
Summary

Services need to adapt to individual differences in communication/interaction in order to enhance patient care

- Be aware of the communication difficulties of individuals with mental health disorders
- Modify the communication environment
- Work collaboratively
- Adapt intervention programmes
- Provide therapy for specific difficulties

And in order to do this most effectively, use the specialist skills and experience of a Speech Pathologist!!!
FINISHED!!!

Any Questions?

mary.woodward@sswahs.nsw.gov.au

or

info@speakyourmindservices.com