Trinity College Dublin
Coláiste na Tríonóide, Baile Átha Cliath
The University of Dublin

Looking back, moving forward: SLT in mental health

(...*not quite 50 years a growin'* but getting there!)

Irene P. Walsh PhD

Department of Clinical Speech & Language Studies

IASLT Conference May 2019 , Croke Park Conference Centre

Where have we been?

Where are we going?

3 key quotes / principles?

1. Language tethers us to the world – without we spin like atoms (Penelope Lively- Moon Tiger; 1987; 41)

2. Centrality of language and communication to diagnosis [in psychiatry] (Gravell & France, 1991; 3)

3. Working 'alongside' people with mental health disorders (Repper & Perkins,1996)

1.

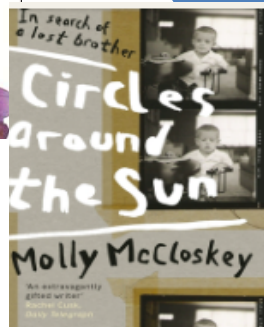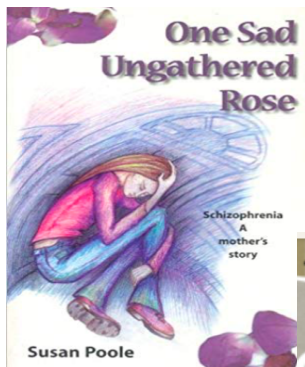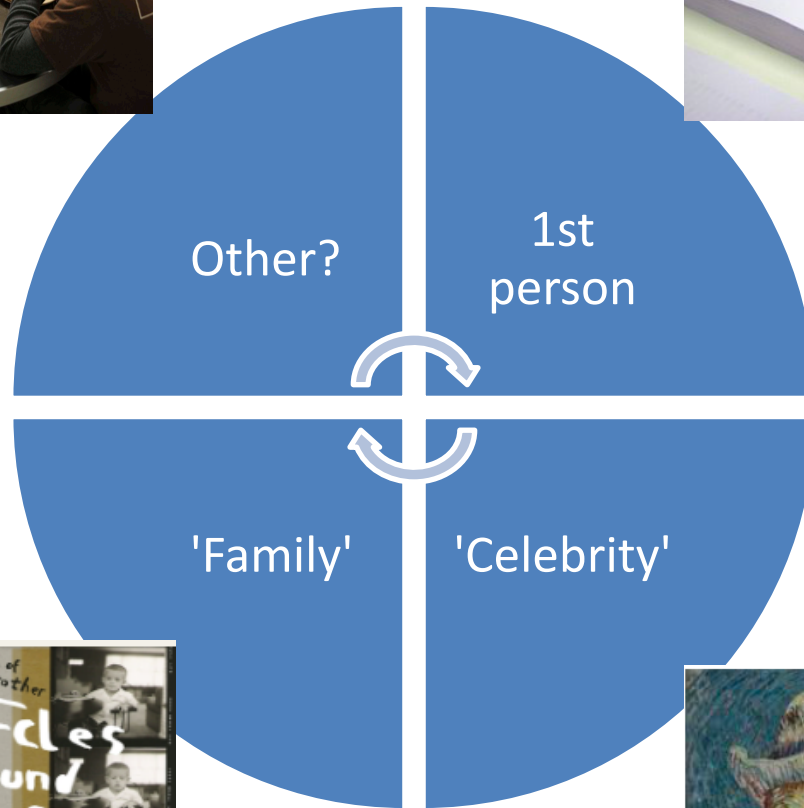**Language tethers us to the world – without we spin like atoms**
(Penelope Lively- Moon Tiger; 1987; 41)

CONTEXT: "Today language abandoned me. I could not find the word for a simple object – a commonplace familiar furnishing. For an instant, I stared into a void. **Language tethers us the world; without we spin like atoms…"**

What does it mean ?

- Language makes us human?

- Language gives depth and meaning to our lives?

- Language allows us to engage with the world in all its compexity?

- Is it that when 'language' is taken away/ compromised, our very being (and identity) is challenged?

Other?

1st person

'Family'

'Celebrity'

**Language tethers us to the world – without we spin like atoms
(Penelope Lively- Moon Tiger; 1987; 41)**

*"If there is something to be learned from [these pages] it is the redeeming power of something well described" (*Anne Enright, 2011)

Looking forward…

- More of the same - the 'living' experience … 'language' of stories

- Mental health consequences of other conditions "letting stories breathe" (Frank, 2012)

- Other first person/family accounts /other experiences of 'diagnosis' e.g. Fluency/ Dysphagia/ Aphasia/ adult diagnosed ASD/other….

1.

Language tethers us to the world – without we spin like atoms (Penelope Lively- Moon Tiger; 1987; 41)

2.

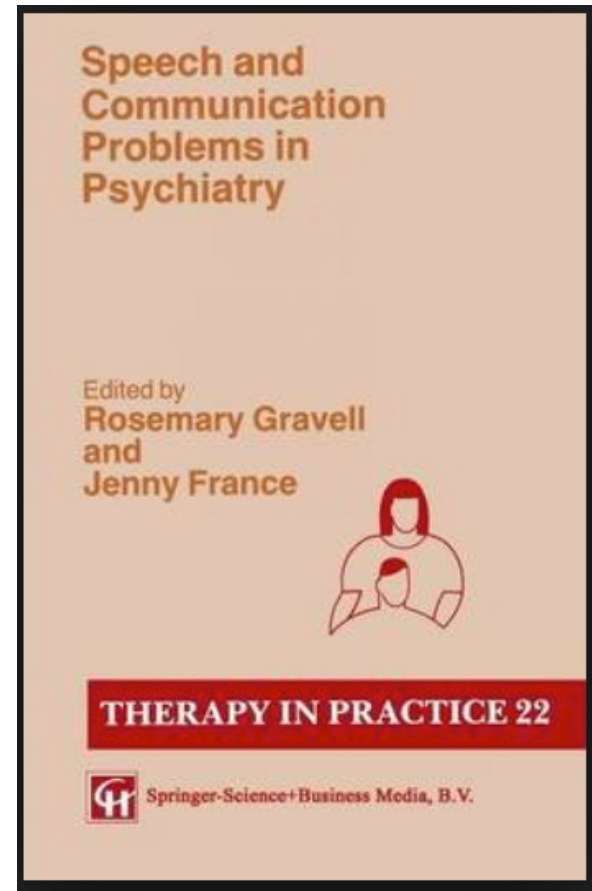Centrality of language and communication to diagnosis [in psychiatry] (Gravell & France, 1991; 3)

CONTEXT: " *… the psychiatrist relies predominantly on language to arrive at a diagnosis…**centrality of language and communication to diagnosis** "*

What does it mean?

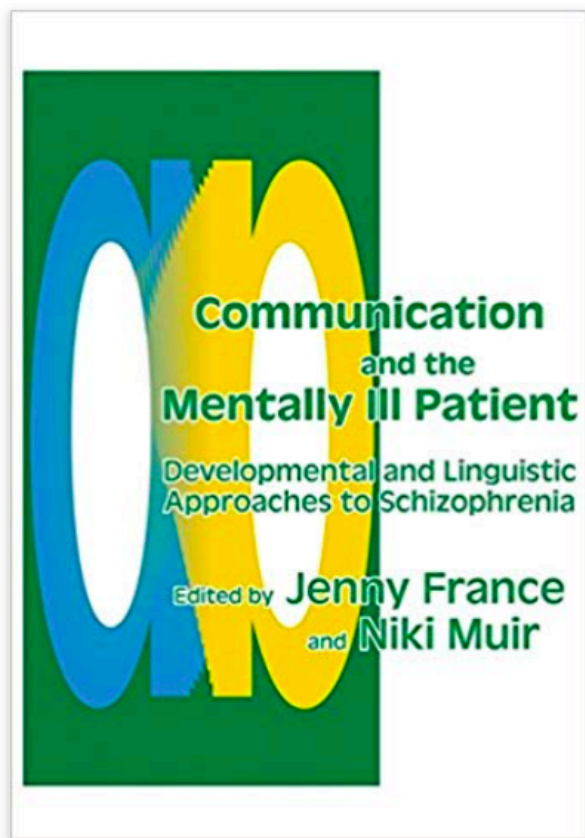Language/communication is

- the tool,

- the process, &

- the desired outcome

Speech and Communication Problems in Psychiatry

Edited by
Rosemary Gravell
and
Jenny France

THERAPY IN PRACTICE 22

Springer-Science+Business Media, B.V.

1996
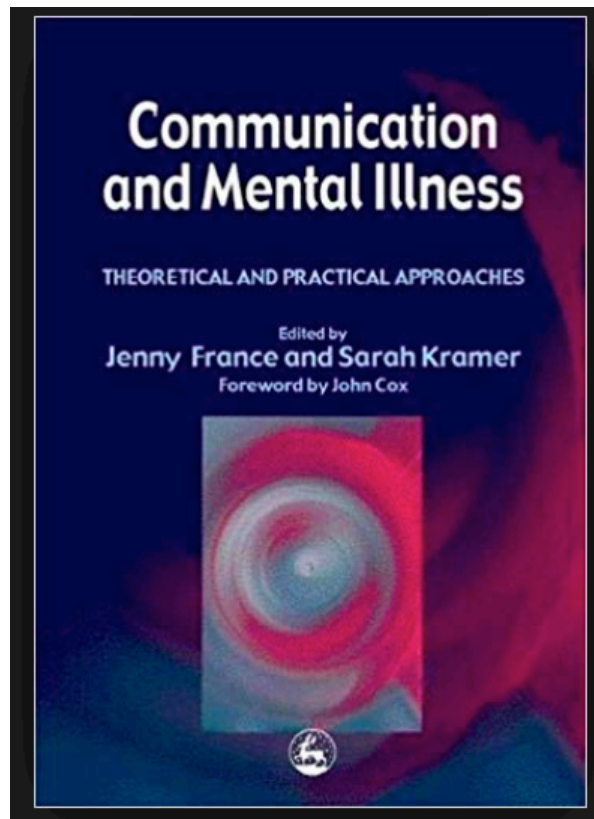
2001

Centrality of language and communication to diagnosis [in psychiatry] (Gravell & France, 1991; 3)
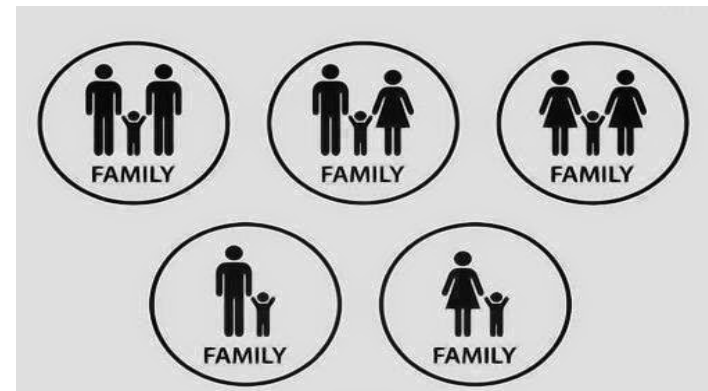
Looking forward…

Example 1

CAMHS context Studies/ Projects

O' Reilly, M., Kiyimba, N. & Lester, J.N. (2019). Building a case for accessing service provision in child and adolescent mental health assessments.

Discourse Studies, 1-17.

Rhetorical Device	Definition	Discourse Example
Quantification	Use of quantifiable markers e.g. severity, longevity , frequency etc.	*'if she's angry…I have to sort of pin her down'* (family 9 – female 8 yrs)
Use of detail	Narrative of specific examples of certain kinds of behavior	*' I've got a list of things that she does do…'* (fam 20 – female 11)
Epistemic corroboration	Epistemic corroboration	*'the doctor actually thinks there are more issues rather than just OCD…'* (fam 21- male 17)
Reported speech	Reported speech ('he said, she said')	*'if we go out anywhere and we say "alright were going out for an hour do you want to come with us?" an' he says "no can I stay at home.."* (fam3 male 13)
Dispositional	Making claim that there is an inherent or fundamental aspect that has been ever present	*"he's always been hyperactive… he's always done silly things"* (fam22-male 11)
Sudden change	Presentation of an extreme or unexpected change in behavior	*" and it was like he changed overnight, he was this wild child screaming kicking punching me"* (fam 4 male 9)
I thought it was x now Y **Physical evidencing**	Contrast between something they thought was ordinary 'x' and something they not believe to be more problematic 'y' Offering of physical evidence to support case being made.	*" I just thought it was ……. but it's just starting to affect everyone else now"* (fam1- female 13) *" I've got a video of the worst …"* (fam 26- male 8)

Centrality of language and communication to diagnosis [in psychiatry] (Gravell & France, 1991; 3)

Example 2 (incl. service user/staff as informants/ communication partners)

*"An evaluation of the **nature and scale** of speech, language, communication and swallowing disorders among mental health service users in CHO 8"*

Community Health Organisation 8 - Laois/Offaly, Longford/Westmeath, Louth and Meath (Day & Residential centre Mullingar)

Walsh, IP et al.

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"He's tormented enough..."

"A wife, who visits her husband daily, completed the questionnaire with me. When asked how she knows, or what she does when her husband doesn't understand spoken message, his wife told me that she just leaves it – "He is tormented enough". She reported that he doesn't join in conversations.

When asked about situations causing difficulty or anxiety she said that she can never discuss holidays or what she has been doing, as he gets suspicious of who she is with. She said that at times she does get him to write things down when his speech is difficult to understand (on our communication ax with him he has a significant dysarthria).

What struck me most about her interview was that, clearly, there are difficulties and impact on conversations that she has had to figure out herself since the onset of his mental health difficulties. And he has never been referred for SLT ax for communication".

Example 3 (incl. staff perspectives as communication partners)

*"Needs evaluation for a Speech and Language Therapy service to adult **forensic mental health services:** Staff perspectives".*

1. Language tethers us to the world – without we spin like atoms (Penelope Lively- Moon Tiger; 1987; 41)

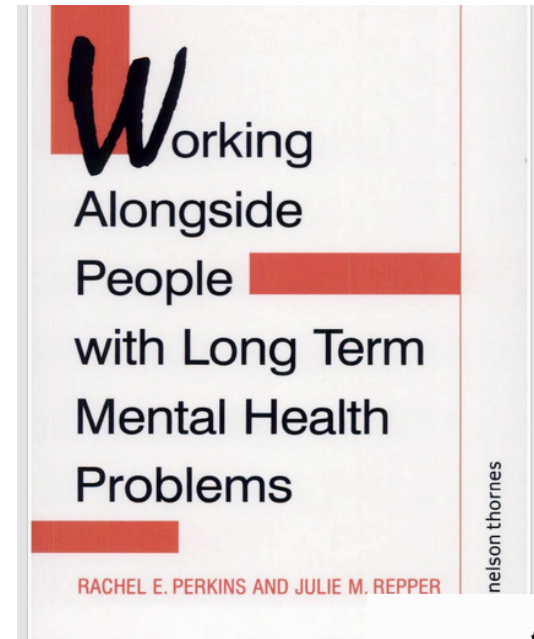2. Centrality of language and communication to diagnosis [in psychiatry] (Gravell & France, 1991; 3)

3. Working 'alongside' people with mental health disorders (Repper & Perkins,1996)

- Not *with*, not *on*, not *for* but

  'alongside'

- Multiple ways and creative means, as

- Co-researchers/ writers

- Co-teachers

- Consultants

- Collaborators on initiatives

- Other

Working Alongside People with Long Term Mental Health Problems

nelson thornes

RACHEL E. PERKINS AND JULIE M. REPPER

A COLLABORATIVE Advocate ↔ Client RELATIONSHIP

Making the future together: Shaping autism research through meaningful participation

Sue Fletcher-Watson[1], Jon Adams[2], Kabie Brook[3],
Tony Charman[4], Laura Crane[5], James Cusack[6], Susan Leekam[7],
Damian Milton[8,9], Jeremy R Parr[10] and Elizabeth Pellicano[11]

**Example 1
Co-workers**

the outcomes from a series of seminars jointly organised, identified five topics relevant to building a community of practice in participatory research:

Respect, Authenticity, Assumptions, Infrastructure & Empathy

Working 'alongside' people with mental health disorders (Repper & Perkins, 1996)

"It's Not the Asperger's That Causes the Anxiety, It's the Communication"

Person-Centered Outcomes of Hope and Recovery in a Cultural–Clinical Borderland

Example 2

Co-researcher
Co-writer
Co-teacher
Consultant

Irene P. Walsh, Patricia Delmar, and Caroline Jagoe

This article focuses on a narrative account of a therapeutic journey experienced by 2 of the authors: an individual (P.D.) with a diagnosis in adulthood of autism spectrum disorder (ASD) and a speech–language pathologist/researcher (I.W.). Instead of adopting a traditional expert clinician treating an impaired patient stance in a highly formalized clinical setting, with concomitant role expectations of power and perceived inequality, a cultural–clinical borderland was coconstructed. The figurative notion of *borderland* in this context is used to describe a physical and psychological space characterized by a more flexible, informal, and authentically shared therapeutic relationship, influenced by a merging of cultures. The cultures at play in this context were an ASD and non-ASD culture and the culture and practice of speech–language pathology. Accounts of social communication experiences, challenges, and anxieties focused on personal reflections, when misunderstandings and miscommunications surfaced from perceived cultural differences. Instead of reinforcing experiences of otherness and difference—which may be an inadvertent by-product of impairment-focused therapy—a positive trajectory of hope and recovery emerged from these interactions when they were placed within a person-centered context. **Key words:** *autism spectrum disorder, hope, narrative, outcomes, person-centered, social communication*

Working 'alongside' people with mental health disorders (Repper & Perkins,1996)

Example 3

Co-data analysts & interpreters

"Whilst it is common for service user researchers to be involved in data collection -most typically interviewing other service users- it is less common for service user researchers to be involved in data analysis and interpretation. This means that a unique and significant perspective on the data is absent"

Hearing the voices of service user researchers in collaborative qualitative data analysis: the case for multiple coding

Angela Sweeney PhD,*† Kathryn E Greenwood PhD,‡§¶ Sally Williams BSc,¶ Til Wykes PhD** and Diana S Rose PhD†

*Department of Mental Health Sciences, University College London, †Health Service and Population Research Department, Institute of Psychiatry, King's College London, ‡Early Intervention in Psychosis Service, Sussex Partnership NHS Foundation Trust and School of Psychology, University of Sussex, §Department of Psychology, Institute of Psychiatry, ¶PICuP Clinic, The Maudsley Hospital, Maudsley NHS Foundation Trust, South London, and **Department of Psychology, Institute of Psychiatry

Correspondence
Angela Sweeney
Department of Mental Health Sciences
University College London
Charles Bell House
67-73 Riding House Street
London
W1W 7EJ
UK
E-mails: angela.sweeney@ucl.ac.uk

Abstract

Background Health research is frequently conducted in multi-disciplinary teams, with these teams increasingly including service user researchers. Whilst it is common for service user researchers to be involved in data collection – most typically interviewing other service users – it is less common for service user researchers to be involved in data analysis and interpretation. This means that a unique and significant perspective on the data is absent.

Aim This study aims to use an empirical report of a study on Cognitive Behavioural Therapy for psychosis (CBTp) to demonstrate the value of multiple coding in enabling service users voices to be heard in team-based qualitative data analysis.

Design The CBTp study employed multiple coding to analyse service users' discussions of CBT for psychosis (CBTp) from the perspectives of a service user researcher, clinical researcher and psychology assistant. Multiple coding was selected to enable multiple perspectives to analyse and interpret data, to understand and explore differences and to build multi-disciplinary consensus.

Results Multiple coding enabled the team to understand where our views were commensurate and incommensurate and to discuss and debate differences. Through the process of multiple coding, we were able to build strong consensus about the data from multiple perspectives, including that of the service user researcher.

Discussion Multiple coding is an important method for understanding and exploring multiple perspectives on data and building team consensus. This can be contrasted with inter-rater reliability which is only appropriate in limited circumstances.

Conclusion We conclude that multiple coding is an appropriate and important means of hearing service users' voices in qualitative data analysis.

Working 'alongside' people with mental health disorders (Repper & Perkins,1996)
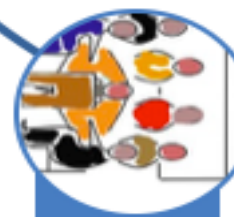
Example 4 :

Infrastructure informants

– " I was responsible again for my own space in the world"

Jepson, J.A. (2019). Reflections

Schizophrenia Bulletin, Vol 45, Issue 3, May 2019, Page 502, https://doi.org/10.1093/schbul/sbx186

– e.g. Linn Dara CAMHS/ other

Working 'alongside' people with mental health disorders (Repper & Perkins,1996)

Clinical Specialism SLT- MHD & beyond…

Brophy & O' Connor

- SLTs who work directly in adult services or in services with a large mental health component.

- Clinical & policy issues - support the development of the role; (March 2019).

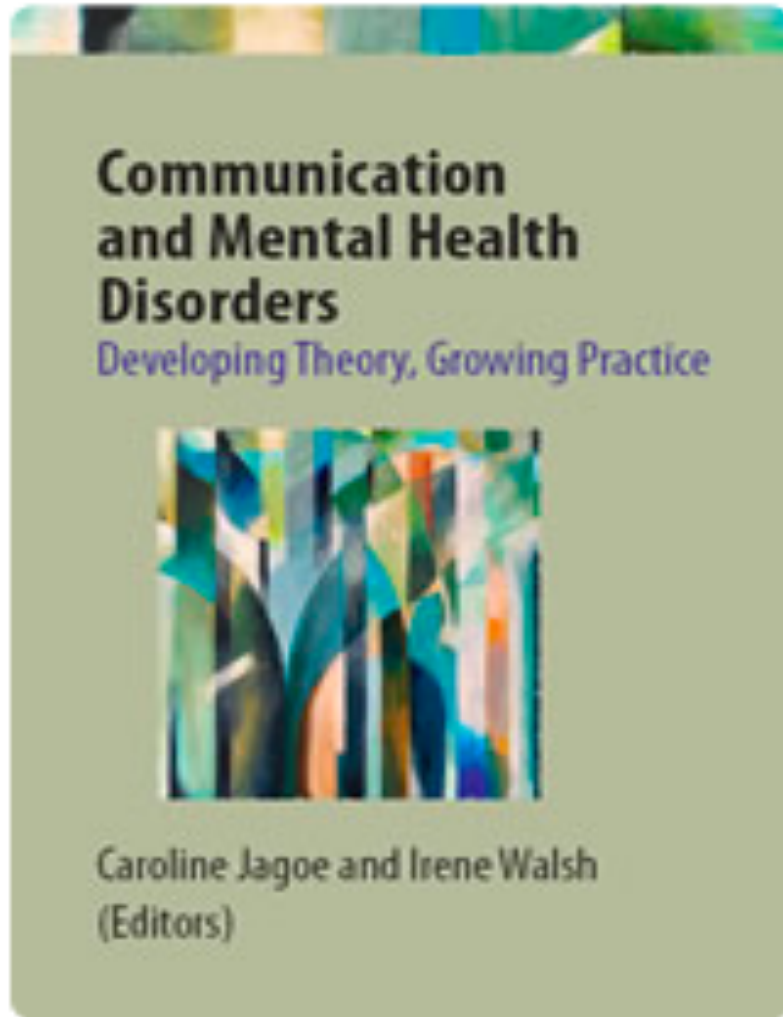- NB for SLT to be involved in policy as well as clinical work:

- review of *Vision for Change*

- IASLT's prioritisation of SLT in Mental Health for their **pre-budget submission**

- Supporting people with SLCN and MHDs to be involved **in their own care** (starting with SLT) and also being involved in **how services** are delivered.

- **"The role of SLT in guiding service user involvement for mental health service users with communication support needs"**

-

- **Jennifer Brophy & Stephanie O'Connor** (in press- Jagoe & Walsh, 2019)

Looking to the near-future…

Communication and Mental Health Disorders
Developing Theory, Growing Practice

Caroline Jagoe and Irene Walsh (Editors)

IASLT

Speech and Language Therapy in Mental Health Services;
A Guidance Document, 2015.

Date of approval by IASLT Council;	Policy Operational Date;	Policy Review Date;
10th October 2015	22nd October 2015	2018

IRISH ASSOCIATION OF SPEECH & LANGUAGE THERAPISTS

SPEECH AND LANGUAGE THERAPY IN MENTAL HEALTH SERVICES; A GUIDANCE DOCUMENT; 2015

Finally, looking (further) forward

Future is in safe hands 1

Year 3 student reflection (2019)

The Future
NEXT EXIT

On accessing services …

"…if communication is not present and a strong link to the outside world not inherent and accessible, how could we expect people to 'speak up', come forward, ask for help, access help and navigate a <u>hugely</u> language based health service?

Communication is both an outlet as well as for access , and with an added barrier to expressing yourself, speech, language or otherwise, people are more isolated in their illness, their minds, and their own current realities"

Future is in safe hands 2

Year 4 student reflection (2019)

On team work…

"SLT has also been an art in that we are a patch in the tapestry of the multidisciplinary team. In my years of placement, I have seen how this complex tapestry is woven together, each discipline a necessary part to the whole , some in closer contact with others… but all coming together to form a protective blanket around the vulnerable children and families we served. The tapestry was not plain- no, it was a vibrant mix of skills, personalities and expertise and it was heartening to see that the sum was indeed greater than its parts"

Future is in safe hands 3

Year 4 Student reflection (2019)

On communication …

" Even I, myself, in first year, was wholly ignorant of the importance of communication to the world. It is something bigger than 'us' : It is interaction, it is gossip, it is politics, it is enjoyment, love and sadness all in one"

ipwalsh@tcd.ie

References

contact

ipwalsh@tcd.ie