Looking back, moving forward: SLT in mental health

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

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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)
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 complexity?

• Is it that when ‘language’ is taken away/ compromised, our very being (and identity) is challenged?
“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
Centrality of language and communication to diagnosis [in psychiatry] (Gravell & France, 1991; 3)
Looking forward...

Example 1

CAMHS context Studies/ Projects


*Discourse Studies*, 1-17.
<table>
<thead>
<tr>
<th>Rhetorical Device</th>
<th>Definition</th>
<th>Discourse Example</th>
</tr>
</thead>
<tbody>
<tr>
<td>Quantification</td>
<td>Use of quantifiable markers e.g. severity, longevity, frequency etc.</td>
<td>‘if she’s angry…I have to sort of pin her down’ (family 9 – female 8 yrs)</td>
</tr>
<tr>
<td>Use of detail</td>
<td>Narrative of specific examples of certain kinds of behavior</td>
<td>‘I’ve got a list of things that she does do...’ (fam 20 – female 11)</td>
</tr>
<tr>
<td>Epistemic corroboration</td>
<td>Epistemic corroboration</td>
<td>‘the doctor actually thinks there are more issues rather than just OCD...’ (fam 21- male 17)</td>
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<tr>
<td>Reported speech</td>
<td>Reported speech (‘he said, she said’)</td>
<td>‘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)</td>
</tr>
<tr>
<td>Dispositional</td>
<td>Making claim that there is an inherent or fundamental aspect that has been ever present</td>
<td>“he’s always been hyperactive... he’s always done silly things” (fam22-male 11)</td>
</tr>
<tr>
<td>Sudden change</td>
<td>Presentation of an extreme or unexpected change in behavior</td>
<td>“and it was like he changed overnight, he was this wild child screaming kicking punching me” (fam 4 male 9)</td>
</tr>
<tr>
<td>I thought it was x now Y</td>
<td>Contrast between something they thought was ordinary ‘x’ and something they not believe to be more problematic ‘y’</td>
<td>“I just thought it was ....... but it’s just starting to affect everyone else now” ( fam1- female 13 )</td>
</tr>
<tr>
<td>Physical evidencing</td>
<td>Offering of physical evidence to support case being made.</td>
<td>“I’ve got a video of the worst ...” (fam 26- male 8)</td>
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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.
“He’s tormented enough...”

Example

“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)

Not *with*, not *on*, not *for* but ‘alongside’

- Multiple ways and creative means, as
- Co-researchers/ writers
- Co-teachers
- Consultants
- Collaborators on initiatives
- Other
Making the future together: Shaping autism research through meaningful participation

Sue Fletcher-Watson1, Jon Adams2, Kabie Brook3, Tony Charman4, Laura Crane5,6, James Cusack6, Susan Leekam7, Damian Milton8,9, Jeremy R Parr10 and Elizabeth Pellicano11

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

Example 1
Co-workers
“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

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
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.
Example 4:

**Infrastructure informants**

- “I was responsible again for my own space in the world”

Jepson, J.A. (2019). Reflections


- e.g. Linn Dara CAMHS/ other
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”

Looking to the near-future...

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)

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 hugely 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”
"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"
"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"
Thanks for listening….

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References

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