

Written evidence from The Royal College of Speech and Language Therapists

1. Executive summary

- The Royal College of Speech and Language Therapists is pleased to provide a submission to the Justice Committee inquiry into women in prison.
- Speech language and communication needs and swallowing difficulties are more prevalent among women offenders than the general populationⁱ.
- Unless those needs are identified and appropriately supported, they can act as a barrier to referrals, assessments and verbally mediated treatment programmes, especially those that are verbally mediated, which subsequently may be inaccessible and fail.
- There is widespread variability in access to speech and language therapy in prisons, meaning opportunities to identify and support women's needs are missed.

2. The Royal College of Speech and Language Therapists recommends:

1. Speech and language therapy should be provided in all prisons to support people with communication or swallowing needs.
2. All staff working along the justice pathway, including in prisons, should be trained to recognise and support women with speech, language and communication needs and swallowing difficulties. We recommend that all prison staff complete The Box communication trainingⁱⁱ.

3. Prevalence of speech, language and communication needs of women in the justice system

- Over 60% of young people who offend will have speech, language and communication needsⁱⁱⁱ compared with 10% of young people in the community^{iv}. These are a hidden disability, and identification in the justice system is significantly poor.
- Communication problems persist into adulthood. Research from adult prisons has found that up to 79% of adults have speech, language and communication needs^v.
- Women are also likely to have conditions, which are prevalent across the prison estate, that have communication difficulties commonly associated with them. These include autism, learning disabilities and mental health.

4. Why is the prevalence so high?

- There is a large body of evidence that speech, language and communication needs are more prevalent in the offending population compared to the general population^{vi}.
- This has been explained by a compounding risk model^{vii} which focuses on the knock-on effect that communication can have on behaviour, educational and employment outcomes, as well as social mobility and mental wellbeing.
- Communication difficulties may be linked to the effects of adverse childhood experiences including trauma, neglect^{viii}, being taken into care^{ix} and domestic violence abuse^x.
- Those who enter the criminal justice setting often do so from settings where there is a heightened risk of having communication needs which have been previously unidentified^{xi}, including having a special school history, being unemployed or in touch with mental health services^{xii}.

5. What is the impact of communication difficulties for women in the criminal justice system

- Communication skills are fundamental and foundational. They are central to expression (our ability to make ourselves understood), comprehension (our ability to understand what is being said) and knowing how to speak to different people in the right kind of way at the right time (social communication).
- Women with communication needs will face barriers at all stages of the criminal justice pathway. Prisons make substantial language and communication demands which put those with communication needs at a disadvantage. This includes:
 - **compliance with day-to-day procedures and routines** (following instructions and orders, understanding routines);
 - **taking part in offender treatment or rehabilitation programmes** (almost all psychological therapies and therapeutic programmes are verbally mediated, making information and support difficult to access. Women with speech, language and communication needs need support to access these^{xiii});
 - **participating in education, training programmes or re-settlement activities** (activities that require good understanding and conversation and being able to communicate your wishes); and
 - **accessing health assessments, advice and treatment** (which relies on relaying information verbally and in writing and conversation. These may be inaccessible or return inaccurate results, so women's health difficulties escalate).
- Early recognition of communication needs is essential if a woman is to receive the necessary support to engage with and participate fully in the justice system.
- A lack of training for those involved at all stages of the criminal justice system, can mean opportunities are missed to identify the speech and language needs of women at early stages in the justice pathway such as at liaison and diversion, prosecution and sentencing.
- It is estimated that around 60% of women in prison have children^{xiv}. The mother's incarceration has an impact on her family^{xv}. The mother's separation reduces her ability to develop and respond to her child's language needs^{xvi} thus perpetuating the intergenerational cycle of poor speech, language and communication needs^{xvii}.

6. Eating, drinking and swallowing needs (dysphagia)

- Eating, drinking and swallowing difficulties are associated with a range of conditions including learning disability, brain injury, stroke, cancer and progressive neurological conditions including dementia.
- They can also be associated with the use of antipsychotic drugs. Higher rates of swallowing problems and choking are due to factors such as medication side effects^{xviii xix}.
- Women engage in deliberate choking as a form of self-harm^{xx}.
- Eating, drinking and swallowing difficulties have potentially life-threatening consequences. Left unsupported they can result in choking, pneumonia, chest infections, hospital admission and in some cases, death^{xxi}.
- Early intervention improves nutrition and hydration and has a positive impact on physical and mental wellbeing^{xxii}.

7. Provision of speech and language therapy in prisons

- There is wide variation in access to speech and language therapy in prisons^{xxiii}, meaning opportunities to identify and support women's needs are missed. This is despite the strong evidence from previous research studies^{xxiv}.
- A women's service which embeds speech and language therapy is at Rampton High Secure.

Case study: Supporting women at Rampton High Secure

- The women's service focus on rehabilitation and treatment of the women's difficulties and offending behaviour. Often the women within the service have experienced chaotic lifestyles with long histories of abuse and trauma.
- The women's service offer trauma informed assessment and treatment to target the women's specific vulnerabilities.
- Each woman is supported by a robust, embedded, multi-disciplinary team including psychiatrists, psychologists, speech and language therapists, dieticians, clinical nurse specialists, education and social workers. This allows for the provision of a range of treatments to treat the woman's needs and target the underlying causes of offending.
- All women are offered the opportunity to access a speech and language therapy assessment from which treatment plans and advice are provided.
- The speech and language therapy team offer individual and group therapy programmes, support women to access verbally mediated therapies and provide indirect treatment through working with staff teams to increase their understanding and skills in communicating effectively. The speech and language therapy team also provide accessible information across the site.
- Communication is at the heart of understanding and reducing restraint, therefore, the speech and language therapy works with the violence reduction team to embed the importance of communication in promoting least restrictive practice.

8. The role of speech and language therapists

Day to day roles and responsibilities of the speech and language therapy team are:

- **Managing:** They provide direct assessment and management of speech, language and communication and/or swallowing difficulties in people of all ages, including:
 - assessing people, advising on appropriate response and deliver therapy; and
 - raising awareness and understanding amongst the wider prison workforce of how speech, language and communication needs present, and their potential impact on verbally mediated interventions.
- **Enabling:** They can enable people disorders to develop the skills they require to:
 - access information about their condition and access other services;
 - benefit from interventions and treatment programmes; and
 - develop their ability to express themselves effectively and have their needs met.
- **Adapting:** They help adapt assessments and interventions so people can participate, including through modifying group work or other psychological interventions. They modify visual documents and signage to make the prison a communication friendly and accessible environment; and
- **Supporting:** They support, advise and train prison staff and the wider multidisciplinary team to recognise and respond effectively to people with

communication or swallowing needs, and understand the impact of behaviour on swallowing.

9. About the RCSLT

- The Royal College of Speech and Language Therapists (RCSLT) is the professional body for speech and language therapists, students and support workers working in the UK. The RCSLT has over 18,000 members. We promote excellence in practice and influence health, education, social care and justice policies.

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REFERENCES

- ⁱ Coles, H, Gillett, K, Murray, G, Turner, K (2017) 'The Royal College of Speech and Language Therapists Justice Evidence Base Consolidation'<https://www.rcslt.org/wp-content/uploads/media/Project/RCSLT/justice-evidence-base2017-1.pdf>
- ⁱⁱ RCSLT The Box: Communication help for the justice system <https://www.rcslt.org/learning/the-box-training/#section-2>
- ⁱⁱⁱ Bryan, K., Garvani, G., Gregory, J. & Kilner, K. (2015). Language Difficulties and Criminal Justice: The Need for Earlier Identification. *International Journal of Language and Communication Disorders*, 50 (6), 763-775
- ^{iv} Law J, McBean, K, Rush, R. Communication skills in a population of primary school-aged children raised in an area of pronounced social disadvantage. *International Journal of Language and Communication Disorders*. 2011;46(6):657-64.
- ^v McNamara, N. (2012). Speech and language therapy within a forensic support service. *Journal of Learning Disabilities and Offending Behaviour* 3 (2) 111-117.
- ^{vi} Talbot, J (2010). Seen and Heard: Supporting vulnerable children in the youth justice system. Prison Reform Trust www.prisonreformtrust.org.uk/uploads/documents/SeenandHeardFINAL.pdf
- ^{vii} Bryan, K., Garvani, G., Gregory, J. & Kilner, K. (2015). Language Difficulties and Criminal Justice: The Need for Earlier Identification. *International Journal of Language and Communication Disorders*, 50 (6), 763-775.
- ^{viii} Jacobson et al., 2010.
- ^{ix} Prisoners' childhood and family backgrounds. MOJ (2014) <https://www.gov.uk/government/publications/prisoners-childhood-andfamily-backgrounds>
- ^x Prison Reform Trust (2017) "There's a reason we're in trouble": Domestic abuse as a driver to women's offending, London: PRT
- ^{xi} Coles, H, Gillett, K, Murray, G, Turner, K (2017) 'The Royal College of Speech and Language Therapists Justice Evidence Base Consolidation'<https://www.rcslt.org/wp-content/uploads/media/Project/RCSLT/justice-evidence-base2017-1.pdf>
- ^{xii} Loveless, J. (2010) 'Domestic Violence, Coercion and Duress', *Criminal Law Review*, pp. 1-3 2
- ^{xiii} No One Knows, Prison Reform Trust
- ^{xiv} Mothers in prison: The sentencing of mothers and the rights of the child, Rona Epstein, The Howard League Reform
- ^{xv} Gender Specific Standards to Improve Health and Wellbeing for Women in Prison in England, Public Health England, 2018
- ^{xvi} RCSLT, Speech, Language and Communication Capacity A National Asset,
- ^{xvii} RCSLT, The intergenerational cycle of speech, language and communication, outcomes and risks
- ^{xviii} K. J. Aldridge, N. F. Taylor (2012). *Dysphagia in Adults with Mental Illness*
- ^{xix} Chapter 17: Psychiatric Disorders and Communication, Bryan K, University of Surrey, UK Almirall
- ^{xx} Consensus from Speech and Language Therapists working with women across low, medium and high secure units, 2021.
- ^{xxi} RCSLT dysphagia Factsheet: Giving Voice to people with dysphagia, RCSLT, <https://www.rcslt.org/wp->

content/uploads/media/Project/RCSLT/rcslt-dysphagia-factsheet.pdf

^{xxii} Giving Voice to people with dysphagia, RCSLT, <https://www.rcslt.org/wp-content/uploads/media/Project/RCSLT/rcslt-dysphagia-factsheet.pdf>

^{xxiii} RCSLT mapping 2020 found significant gaps in the provision of speech and language therapy to prisons.

^{xxiv} Coles, H, Gillett, K, Murray, G, Turner, K (2017) 'The Royal College of Speech and Language Therapists Justice Evidence Base Consolidation' <https://www.rcslt.org/wp-content/uploads/media/Project/RCSLT/justice-evidence-base2017-1.pdf>