

Cyflwynwyd yr ymateb i ymgynghoriad y [Pwyllgor Cydraddoldeb a Chyfiawnder Cymdeithasol](#) ar [Profiadau menywod yn y system cyfiawnder troseddol](#)

This response was submitted to the [Equality and Social Justice Committee](#) consultation on [Women's experiences in the criminal justice system](#)

WECJS 05

Ymateb gan: Chwarae T | Response from: Royal College of Speech and Language Therapists





Senedd Cymru Equality and Social Justice Committee Consultation Women's experiences in the criminal justice system

Executive summary

The Royal College of Speech and Language Therapists (RCSLT) Wales welcomes the opportunity to provide written evidence as part of the Committee's inquiry on Women's experiences in the criminal justice system (CJS). We are pleased that the Committee is looking strategically at women's experiences across the CJS, with a view to improving understanding of the distinct needs and vulnerabilities of women who offend and identifying issues that may need a greater focus.

- Speech language and communication needs (SLCN) and swallowing difficulties are more prevalent among women offenders than the general population (Coles et al 2017).
- Unless those needs are identified and appropriately supported, they can act as a barrier to referrals, assessments and verbally mediated treatment programmes, 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 often missed.

Our response focuses on the SLCN of women in the CJS and also makes a series of recommendations for committee consideration.

Key recommendations

- Speech and language therapy should be provided in all prisons to support people with communication and/or swallowing needs.
- Those who enter the CJS often do so from settings where there is a heightened risk of people having communication needs which may not have been previously identified. Early identification is essential to reducing the risk of offending. In addition to speech and language therapy provision, there needs to be a clear focus on identifying and supporting SLCN amongst agencies most in contact with those at risk of offending. The RCSLT recommend that all staff working along the justice pathway, including in prisons, should be trained to recognise and support women with SLCN and swallowing difficulties. We recommend that all staff complete [The Box](#) communication training.
- The Female Offending Blueprint for Wales ([Welsh Government, 2020](#)) highlights the importance of diversion. Communication support should be embedded as a core requirement within these teams.

About the Royal College of Speech and Language Therapists (RCSLT)

1. RCSLT is the professional body for speech and language therapists, SLT students and support workers working in the UK. The RCSLT has 20,000 members in the UK (650 in Wales) representing approximately 95% of SLTs working in the UK (who are registered with the Health & Care Professions Council). We promote excellence in practice and influence health, education, care and justice policies.
2. Speech and language therapy manages the risk of harm and reduces functional impact for people with speech, language and communication support needs and/ or swallowing difficulties.
3. SLTs and language therapists work in a variety of environments across the justice system.

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

4. Individuals in the CJS, including women and girls, are more likely to have significant SLCN compared to the general population (Coles et al 2017). Substantial international evidence indicates 60% of young people who offend will have significant and undetected communication needs (Bryan K et al. (2015), compared with around 10% of the general population. SLCN for young people in the CJS are often undiagnosed; with Bryan and colleagues (2007) reporting only 5% of young offenders had their SLCN identified prior to their entry to the Youth Justice System (YJS).
5. Communication problems persist into adulthood. Research from adult prisons has found that up to 79% of adults have SLCN (McNamara N 2012).
6. Those who enter the CJS often do so from settings where there is a heightened risk of people having communication needs which may not have been previously identified. For young people these include being in care, excluded from school, referred to a community youth offending team, referred to Children and Adolescent Mental Health Services, a drug rehabilitation scheme, or having emotional or behavioural problems. For adults these include being unemployed, in touch with mental health services, being in care or having a special school history (Bryan et al 2015).
7. 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 difficulties. 20-30% of people in prison are estimated to have learning disabilities or difficulties that interfere with their ability to cope with the CJS (Louckes N, 2007). 80% of prisoners with learning disabilities or difficulties report having problems reading prison information – they also had difficulties expressing themselves and understanding certain words (Talbot J, 2008).
8. The RCSLT has produced an extensive justice dossier which provides detail of research on the area and is available [here](#).
9. Widespread international evidence is also supported by research closer to home. A recent report from the Gwent Police and Crime Commissioner (2020) discussed the correlation between vulnerability, criminality and exploitation of a group of children in Newport. Of the 13 children in the cohort, almost all of the children were found to have SLCN, and the majority of children referred to the YJS had SLCN to some degree. The report also identified

that many children's SLCN goes undiagnosed prior to the YJS's screening process. Currently **72%** of young people coming through to Neath Port Talbot Youth Justice Service are showing degree of SLCN. Of the Young people referred for a speech and language therapy assessment last financial year 2021-2022 none had previously been referred to the NHS speech and language therapy service.

What is the impact of communication difficulties for women in the CJS

10. 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).
11. 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 SLCN may need support to access such programmes);
 - 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).
12. 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.
13. A lack of training for those involved at all stages of the CJS can mean opportunities are missed to identify the SLCN of women at early stages in the justice pathway such as at liaison and diversion, prosecution and sentencing.
14. It is estimated that around 60% of women in prison have children (Epstein. R). The mother's incarceration has an impact on her family (Public Health England, 2018). The mother's separation reduces her ability to develop and respond to her child's language needs (RCSLT) thus perpetuating the intergenerational cycle of poor speech, language and communication needs (RCSLT).

Eating, drinking and swallowing needs (dysphagia) amongst women within the CJS

15. Eating, drinking and swallowing difficulties (dysphagia) 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 anti-psychotic drugs. Higher rates of swallowing problems and choking are due to factors such as medication side effects (K J Aldridge 2012). Women may engage in deliberate choking as a

form of self-harm (Consensus from Speech and Language Therapists working with women across low, medium and high secure units, 2021).

16. 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 (RCSLT dysphagia factsheet). Early intervention improves nutrition and hydration and has a positive impact on physical and mental wellbeing (RCSLT factsheet, Giving voice to people with Dysphagia).

Provision of speech and language therapy in prisons

17. Speech and language therapists have a key role to play in supporting women with communication and swallowing needs. Day to day roles and responsibilities of the speech and language therapy team include:

- **Managing:** They provide direct assessment and management of speech, language and communication and/or swallowing difficulties, including:
 - assessing people, advising on appropriate response and deliver therapy; and
 - raising awareness and understanding amongst the wider prison workforce of how SLCN 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.
 - The RCSLT have developed resources to support such training including [the Box](#) which is a free e-learning tool designed for professionals working in the justice sector. The tool is designed to give professionals in the justice system the ability to identify communication issues and the skills to work successfully with individuals who have such issues.

18. Despite the strong evidence of the impact of the profession in this sphere, there is wide variation in access to speech and language therapy in prisons (RCSLT, 2020) meaning opportunities to identify and support women's swallowing and communication needs are missed.

The case study from Rampton High Secure women's service provides further insights into the importance of embedding speech and language therapy within multi-disciplinary teams.

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.
- 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.

Further information

We hope this paper will be helpful in supporting the committee discussions around the distinct needs and vulnerabilities of women who offend and identifying issues that may need a greater focus. We would be happy to provide further information if this would be of benefit. Please see below our contact details.

Naila Noori, External Affairs Officer (Wales), Royal College of Speech and Language Therapists



Confirmation This response is submitted on behalf of The Royal College of Speech and Language Therapists in Wales. We confirm that we are happy for this response to be made public.

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