



Briefing on the Invest in SLT petition

27 January 2025

This briefing is issued on behalf of Mikey Akers, Francesca Beard, Samantha Berry, Dave Harford, Georgia Leckie, Karen Massey, Sharon Oliphant, Gillian Rudd, Pam Slater, and the Royal College of Speech and Language Therapists.* It is supported by over 45 organisations.

‘As someone who has gone through speech and language therapy myself for a neurological speech disorder called Childhood Apraxia of Speech, I know just how important it is to receive not only early intervention from a speech and language therapist but also the correct type of speech therapy with the recommended quantity per week. It’s just not good enough that in this day and age children, teens, and adults are not able to access the service they so desperately need. Speech, language and communication needs affects all areas of someone’s life, impacting on their mental health and many other life chances. I am so pleased that the Invest in SLT petition is being debated because it is bringing to the Government’s attention how the lack of funding in this area is affecting not only the high percentage of people who need to access this very specialist service but the speech and language therapists who are struggling to fulfil their roles due to a lack of investment and staff retainment in speech and language therapy.’

Mikey Akers, originator of the Invest in SLT petition and founder of Mikey’s Wish Foundation

* Mikey Akers is an advocate and campaigner. He tabled the petition and is the founder of Mikey’s Wish Foundation. Dave Harford, Georgia Leckie, Sharon Oliphant, and Pam Slater are parents. Samantha Berry is an adult who has had speech and language therapy. Francesca Beard, Karen Massey, and Gillian Rudd are speech and language therapists. All these people were heavily involved in the petition’s promotion.

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Briefing supporters

This briefing is supported by 46 organisations representing, supporting, or working with people of all ages who access speech and language therapy, their families, and the professionals working with them.

- 1 Action for Stammering Children
- 2 Afasic
- 3 Ambitious about Autism
- 4 ASLTIP (Association of Speech and Language Therapists in Independent Practice)
- 5 Association of YOT Managers
- 6 Auditory Verbal UK
- 7 BACCH (British Association for Community Child Health)
- 8 BACD (British Academy of Childhood Disability)
- 9 BACP (British Association for Counselling and Psychotherapy)
- 10 BATOD (British Association of Teachers of Deaf Children and Young People)
- 11 Better Communication CIC
- 12 Change Communication
- 13 CICS Group (Cochlear Implanted Children's Support Group)
- 14 CLAPA (Cleft Lip and Palate Association)
- 15 Communication Matters
- 16 Different Strokes
- 17 Disabled Children's Partnership
- 18 Down's Syndrome Association
- 19 Dyscover
- 20 Huntington's Disease Association
- 21 Include.org
- 22 Intermediaries for Justice
- 23 Mikey's Wish Foundation
- 24 N-ABLES
- 25 NAPLIC
- 26 NASS (National Association of Special Schools)
- 27 National Association for Hospital Education
- 28 NatSIP (National Sensory Impairment Partnership)
- 29 Natspec
- 30 NDTi (National Development Team for Inclusion)
- 31 Parkinson's UK
- 32 Rett UK
- 33 Royal College of Speech and Language Therapists
- 34 Signalong
- 35 SMiRA
- 36 Speakeasy
- 37 Speech & Language Link

- 38 Speech and Language UK
- 39 Square Peg
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Introduction

- Communication is fundamental and foundational to human life. It affects how we make ourselves understood, how we understand others, and how we interact with others. Communicating in the way that suits us best is a basic human right, whether that is through the spoken word, signing, or the use of augmentative and alternative communication (AAC).
- So is being supported to eat and drink safely if we have difficulty swallowing.
- Given communication is fundamental and foundational, it must be embedded in all areas of public policy. This includes, in particular, in four of the Government's five missions: growing the economy, an NHS fit for the future, safer streets, and breaking down the barriers to opportunity. It also includes policies designed to ensure that children are ready to learn when they start school, as highlighted in the Prime Minister's Plan for Change speech in December 2024.
- Many people in the United Kingdom have a communication disability, difficulty, or difference, or difficulties with eating, drinking, and swallowing. Some of these needs can be life-long or acquired, related to an illness or following an accident.¹
 - **10% of all children and young people** have a long-term speech, language and communication need. Without support, these young people are at higher risk of mental health problems, exclusion from school, exclusion from the workplace, and potential involvement in the criminal justice system.
 - **20% of adults** can experience difficulty with their communication at some point in their lives, which can arise from a variety of conditions, including mental ill-health, various cancers, a stroke, acquired brain injury, and progressive

¹ Some of the areas in which speech and language therapists work include autism, stammering, mental health, deafness or auditory processing difficulties, progressive neurological conditions, such as dementia, Huntington's disease, motor neurone disease, multiple sclerosis, and Parkinson's, stroke, cerebral palsy, learning disability including Down's syndrome, voice, brain injury, cleft lip and palate, craniofacial conditions, speech sound disorder, including rare speech sound disorders, such as childhood apraxia of speech, long COVID, selective mutism, some cancers, including head and neck cancer, some respiratory conditions, some rare and genetic conditions, developmental language disorder, and Cognitive Communication Disorder. They also support the development of early language and communication skills, people receiving accident and emergency care, those receiving neonatal care, those experiencing homelessness, the victims of domestic abuse, those in the criminal justice system, and people at the end of their lives.

neurological conditions, such as dementia, multiple sclerosis, motor neurone disease, and Parkinson's.

- Unidentified and unsupported, all this can act as a barrier to babies, children, and young people having the best start in life, affecting their educational attainment, the making of friends, and their well-being. This will persist into adulthood, affecting adults' ability to find, secure, retain, or return to employment, as well as impacting their mental health, and the development of positive relationships. For frail older adults, it can affect their quality of life, and their ability to live independently, in their own homes for longer. For those at the end of their life, it can affect their ability to have a good death.
- Speech and language therapists can support people of all ages – babies, children, young people, adults, and the frail elderly – at all stages of their life to overcome the barriers they can face because of their communication disability, difficulty, or difference, and/or their difficulties with eating, drinking, and swallowing.
- Speech and language therapy transforms lives, and we know how much people value it. In a survey about people's experiences of accessing speech and language therapy during lockdown in 2020, 76% of parents said speech and language therapy made their child's life better. The same percentage of adults said the same, that speech and language therapy makes their life better.ⁱ
- For too long, people of all ages with a communication disability, difficulty, or difference, and/or difficulties with eating, drinking, and swallowing have not received the support they, their families and carers, and the professionals working with and supporting them require. Many people have faced difficulties accessing speech and language therapy. Even when people have been able to access therapy, they have not always received the amount they need. For instance, some services may have set limits on the number of sessions they can offer, rather than having the flexibility to meet the individual needs of people who may require more frequent sessions over a longer period.
- The main reasons for this are that for far too long:
 1. speech and language therapy services have not been properly funded to identify and support the needs of their local populations; and
 2. planning for the speech and language therapy workforce has not been fit for purpose, focusing only on the NHS and the health settings in which speech and language therapists work, rather than taking account of all their employers (for example, the independent sector, schools, local authorities, and third sector

organisations) and all the settings in which they work (for example, health, education, social care, and justice).

- The people who have most felt the consequences of this underfunding and failure of workforce planning are those of all ages with communication disability, difficulty, or difference, and those with difficulties with eating, drinking, and swallowing, and their families and carers.
- To raise the profile of - and start to address - this issue, Mikey Akers tabled a petition on the Parliament website in March 2024 on the need [to increase investment in speech and language therapy](#). It secured over 10,000 signatures in just 16 days and was due to be debated on 1 July. In response to the cancellation of the debate due to the General Election, over 40 organisations joined forces with people having speech and language therapy and their families in issuing [a statement highlighting why the petition matters](#) and why it is necessary to increase investment in speech and language therapy services.
- As a collective of people having speech and language therapy and their families, and organisations working with people accessing speech and language therapy, we are very pleased the debate has been rescheduled. We hope this will be the start of the process of improving access to speech and language therapy. The debate provides the Government with the opportunity to set out how it proposes to increase investment in speech and language therapy.

Ask of Government

- Will the Government meet with Mikey Akers, the Royal College of Speech and Language Therapists, and other organisations to discuss how they can work together on addressing these issues?

Key questions for Government

- How will the Government increase investment in the speech and language therapy services that people of all ages – babies, children, young people, working age adults, and older people – and their families require?
- What will the timescale be for this increased investment?

- How will the Government improve the planning for the whole speech and language therapy workforce, no matter where speech and language therapists work, or who employs them?
- How will the Government improve the retention and continuing professional development of the speech and language therapy workforce?
- How will the Government reduce waiting times and improve access to speech and language therapy for individuals across all age groups?
- What metrics are used to assess the effectiveness of speech and language therapy services, and how will these outcomes inform future policy decisions?
- How will the Government realise the short- and long-term economic benefits of investing in speech and language therapy in support of the successful delivery of their missions?

Current access to speech and language therapy

- There are currently long waiting lists to access speech and language therapy in many areas.
- NHS England figures show that in September 2024, 64,604 children were on a waiting list for speech and language therapy – 41% of these (over 26,000) have been waiting more than 18 weeks.ⁱⁱ
- NHS England’s adult community waiting lists show 24,563 adults were on a waiting list for speech and language therapy and 21% had been waiting more than 18 weeks (Community Health Services Waiting Lists).
- This has had and has a range of impacts. Services aimed at preventing or intervening early to address communication and swallowing needs, have been hugely cut over the last 15 years. The system is not in balance as a result and this is showing up in increased waiting lists, the crisis in the SEND system, and in adults being unable to return to work, for example after a stroke.

Children and young people

- When children reach the front of the waiting list and have their first appointment, they often find there is an additional wait before they receive intervention. In some areas, the pressure to reduce waiting lists has resulted in the therapy offer being reduced, and children may not receive the support they need. This does not improve outcomes for children and is demoralising for speech and language therapists.

- The Ofsted annual report for 2021/22 echoed these points:
 - “There are also longer waiting lists for health services such as... speech and language therapy. Even when children and young people have been able to access services, the service has often been interrupted or scaled back.”ⁱⁱⁱ
- In January 2025, a report by the Public Accounts Committee on *Support for children and young people with special educational needs* found:
 - timely access to health expertise constitutes a significant barrier to identifying and supporting special educational needs; and
 - steep rises in speech, language and communication needs, and a significant waiting list for speech and language therapy.

In oral evidence to the Committee, DHSC described making progress increasing the number of speech and language therapists, but recognised there was more to do, with an aspiration for more speech and language therapists.

Adults

- Adults with speech, language and communication needs tell us that their therapy starts too late, and they receive too little for their needs. For example, national stroke data shows that there had been a steady decline in the amount of speech and language therapy received after a stroke.^{iv}
- For people with life-long conditions, there is effectively no adult service. For example, adults with Developmental Language Disorder (DLD). The result is there is no continued support once children transition into adult services. This puts people with life-long conditions are risk of negative outcomes and potentially affects many people. In addition to those with DLD, just two examples of those affected include people with rare genetic conditions, and those with childhood apraxia of speech.
- In addition, many adults may require speech and language therapy due to acquired conditions, including mental ill-health, various cancers, a stroke, acquired brain injury, and progressive neurological conditions, such as dementia, multiple sclerosis, motor neurone disease, and Parkinson’s.

The speech and language therapy workforce

- There are simply not enough speech and language therapists to meet current and future demand. As recognised by NHS England, speech and language therapy is a profession in short supply.^v

- The joint 2023 report from the Royal College of Speech and Language Therapists and the Association of Speech and Language Therapists in Independent Practice *Fail to plan plan to fail* identified years' long, significant failings in planning for the speech and language therapy workforce in England.^{vi}
- In addition to an increase in speech and language therapy students, there needs to be much better continuing professional development for and retention of the existing speech and language therapy workforce. Currently, too many speech and language therapists are leaving the NHS and the profession altogether.
- Effective speech and language therapy should be based on both the clinical evaluation of each individual, and also the specialist knowledge of how any significant needs relating to a specific diagnosis (such as autism, Down's syndrome, apraxia of speech, etc) should be understood and addressed. Specialist therapists must be aware of the typical profile of strengths and challenges associated with a diagnosis, the impact of other conditions (for example hearing, vision, medical) associated with it, and which evidence-based interventions are best applied, in order for speech and language therapy to be most effective.

Background to the #InvestInSLT petition

Children

- Problems with access to speech and language therapy for children and young people go back many years, due to services being under resourced, while the need for support for children's communication has increased.
- Since 2015/16, the number of children and young people with speech, language and communication needs as an identified special educational need has increased from 225,245 to 369,941 in 2023/24 – that's an additional 144,000 children, and an increase of 64%.^{vii}
- Neither funding, nor the number of speech and language therapists, has kept up. The number of registered speech and language therapists increased by only 25% over the same period (2015-2024).^{viii}
- The situation we see today was also highlighted by Ofsted and the Care Quality Commission in their 2017 report:
 - "Too often, therapy services were too overstretched to deliver what was needed in their local areas...Typically, services were being reduced because of

challenges to funding and difficulties in filling vacant posts. This funding did not keep up with the rising number of referrals. This led to unacceptably long waiting times for the children and young people and their families.”^{ix}

- An independent review of provision for children with speech, language and communication needs conducted by the RCSLT with the charity Speech and Language UK (formerly I CAN) published in 2018^x found that:
 - only 15% of people felt speech and language therapy was available as required in their local area.
 - more than half of parents and carers had to wait longer than six months for their child to get the help they needed, with a third waiting over a year.
- The Education Select Committee’s report on Special Educational Needs and Disabilities in 2019 highlighted that speech and language therapy “seemed to be a particular challenge” and that “many therapies, including speech and language therapy, were not being provided or difficult to access, even for schools.”^{xi}

Adults

- The barriers facing adults in accessing speech and language therapy are long-standing and have persisted for decades. At the same time, the number of adults requiring speech and language therapy is increasing, especially for those living with a major illness, or long-term health conditions.
- The 28% increase in stroke admissions highlighted by the Department of Health and Social Care, the rising rates of working-age ill-health highlighted by the Department of Work and Pensions, along with an ageing population, signal an increased need for speech and language therapy.
- The concerns raised in 2008, when 500 people told us that they had inadequate access to therapy after a stroke, continue to affect people today.
- Despite the obvious increasing need, investment in speech and language therapy has not increased at the same speed.
- The lack of investment in adult speech and language therapy services has led to:
 - long waiting lists;
 - limited therapy intervention sessions offered;
 - lack of access to specialised services, particularly for rarer conditions, such as Primary Progressive Aphasia;
 - longer hospital stays due to unmet need; and

- people with unmet communication needs losing their ability to communicate resulting in isolation, depression, loss of independence, unemployment, and reduced quality of life.
- For people with difficulties with eating, drinking, and swallowing, a lack of speech and language therapy puts them at increased risk of choking, malnutrition, and aspiration pneumonia requiring hospital admission, with the potential for increased costs to the public purse, and, in some cases, death.

What needs to happen?

- As per the #InvestInSLT petition, there must be increased investment in and improved workforce planning for speech and language therapy.
- This will help to deliver better lives, the Government's missions in relation to the economy, safer streets, the NHS, opportunity, and children starting school ready to learn. It will also promote prevention and early intervention.
- Universal and targeted service provision need to be in place everywhere as well as specialist services to bring the system back into balance and lead to a better use of scarce resources.
- In this way, we can help to realise the ambitions of the signatories of the #InvestInSLT petition. We can also remove the barriers that too many people of all ages with communication disability, difficulty, or difference, or those with difficulties with eating, drinking, and swallowing, face in their daily lives and in achieving their potential.
- If we fail them, we fail ourselves, and we fail the country, both now and in the future.

What people having speech and language therapy have said

Samantha Berry, a person who has had speech and language therapy

I was able to access a brain injury specialist SALT locally and then subsequently attend a Cognitive Communication clinic with group therapies in Neuro-rehab. It had been an unusual diagnostic journey as MRI clear, yet a small stroke had occurred. Given the increase in strokes post-Covid and subsequent acquired brain injuries more funding is imperative. This is potentially

a life-altering diagnosis. People need assessment, diagnosis, therapy and support to adjust, adapt and move forward in their lives. Speech and language therapists as allied health professionals carry out a major role in assessment rehab and coping strategies for stroke, brain injury and Cognitive Communication Disorders. How can parity for stroke survivors nationwide be achieved without serious financial investment? It is plain obvious that funding equitable to the training needs of the profession needs to be addressed urgently.

Philip Robinson, the husband of someone with Primary Progressive Aphasia

Speech and language therapy has been a lifeline for us as we live with my wife's Primary Progressive Aphasia. It helps us preserve the ability to communicate, keeping our connection strong and maximising quality of life. It helps us stay close and continue to share meaningful moments together.

Pam Slater, a parent

Increasing investment in SLT matters as it is fundamental to the future chances and quality of life to people of all ages. It is vital that the life-changing work that speech and language therapists do is properly commissioned; with investment in the workforce so that early intervention, at a clinically effective dosage is provided, alongside Augmentative, Alternative Communication (AAC) provision. Why, because speech and language is so far reaching, impacting reading, writing, confidence, friendships, in fact everything!

I am absolutely delighted to hear that the petition is going to be debated and hope this will lead to a full review of investment required across the whole service. As a parent of a child with a rare neurological condition, Childhood Apraxia of Speech, my teenage daughter is one of the 'missed generation' who, due to lack of services now, will need continued SLT provision into adulthood. I hope the 'missed generation' won't be forgotten. I also hope the debate will include the social, emotional, and mental health impact of a speech and language condition, and the difficulties people who struggle to communicate have in accessing that.

Georgia Leckie, a parent

As a parent of a child with Childhood Apraxia of Speech, I have experienced firsthand the difficulties in accessing speech and language therapy. NHS services are so stretched that many cannot provide the standard of care that is required to meet children's needs. This must stop. Communication is a basic human right and right now our country is failing individuals with

speech, language and communication needs. I urge the Government to recognise the SLT crisis and invest now.

What speech and language therapists have said

Speech and language therapist Francesca Beard

Communication skills are the foundation of success in education, employment, and social interaction, yet countless individuals across the UK struggle without adequate support. The impact of unaddressed speech and language difficulties is far-reaching, leading to increased mental health challenges, social isolation, and reduced opportunities—not only for individuals but for society as a whole. As a speech and language therapist, I see first-hand the critical need for increased resources, funding, and policies to ensure timely and effective support for everyone, especially those most vulnerable. Investing in accessible, effective speech and language services empowers individuals and fosters a stronger, more inclusive society. This is more than health or education; it's about reducing inequality and building a community where everyone's voice is valued. I urge you to act decisively to address these gaps and help create a future where communication challenges no longer limit anyone's potential.

Speech and language therapist Karen Massey

When children and young people are unable to use their voice to speak and express their thoughts, ideas and emotions, it is access to direct, regular speech and language therapy that gives them this voice and transforms their lives, as well as the lives of their families. Without a significant increase in investment for all speech and language therapy services, these same children and young people are at serious risk of exclusion and mental health problems.

Senior Lecturer and speech and language therapist Gillian Rudd

I welcome the decision to debate the #InvestInSLT petition, thereby recognising the importance of this issue. For too long people have been unable to access the speech and language therapy that they need. Waiting times are long and services are often limited, resulting in short and long-term impacts on wellbeing, education and employment. Change is urgently needed to ensure that speech and language therapy services can better serve patients now and in the future. The Rt Hon Wes Streeting, MP and Secretary of State for Health and Social Care, has called for

reform and for greater "power to the patient". I echo this call and look forward to this opportunity to centre and listen to the voices of people with communication and swallowing needs.

What partner organisations have said

Dr Ria Bernard, Chief Executive, Action for Stammering Children

The fact that so many signed this petition underscores the vital contribution that speech and language therapy services make to the lives of those with speech, language and communication difficulties. At Action for Stammering Children, we understand the importance of timely access to speech and language therapy for children's social and emotional development, and longer-term mental health and well-being. I look forward to hearing how the Government plans to increase investment in services to ensure more children who stammer, and their families, receive the specialist support they need.

Parent supporter of Afasic

The lack of support and then time lost to get referred to SaLT is beyond a joke. Then to have to wait nearly 2 years for my son to be seen has meant my 11-year-old son has only just got a diagnosis of DLD (developmental language disorder) amongst other labels. Years we have battled to get seen and at massive cost to my son's mental health too.

ASLTIP (Association of Speech and Language Therapists in Independent Practice)

ASLTIP fully supports the briefing paper's recommendations, underscoring the critical importance of a well-resourced and sustainable speech and language therapy workforce. Communication is a fundamental human right underpinning education, employment opportunities, relationships, mental health, and overall well being across the age span. Independent speech and language therapists play a crucial role in delivering essential services to individuals with communication and swallowing needs, offering flexibility, collaboration, innovation, and responsiveness to meet growing demand. They are also well placed to support those stepping into the profession, with many examples of innovative and creative student placement solutions. Investment in workforce growth, training, and retention across sectors is crucial so that all speech and language therapists can continue to provide high quality,

evidence-based care to improve outcomes for those they support and provide diverse learning opportunities for the next generation of speech and language therapists.

Diz Minnitt, SEND and Speech and Language Lead, Association of YOT Managers

We know from both research and front-line experience, that children with speech, language and communication needs are hugely overrepresented within the Youth Justice System, and as victims of criminal exploitation. The access to speech and language therapists, who can accurately identify these children's frequently unrecognised and unmet needs at the earliest opportunity, has proved highly effective in ensuring that all professionals can help and support these children to move away from offending behaviour and to engage with and benefit from education, achieving better long-term outcomes for themselves and society.

Anita Grover, CEO of Auditory Verbal UK

The overwhelming support for Mikey's Invest in Speech and Language Therapy petition shows how important this issue is, and why the UK Government must urgently invest in speech, language and communication support and services needed. For deaf babies and children, early and effective support from highly specialist speech and language therapists to develop language and communication is vital, whether they use sign language, spoken language or both. We very much welcome the upcoming debate on this important matter and thank Mikey for his commitment and determination to shine a light on the need to Invest in Speech and Language Therapy.

Jo Holmes, Children, young people and families lead at BACP (British Association for Counselling and Psychotherapy)

Investing in much needed early intervention speech and language therapy is crucial for children's wellbeing or for those who may go on to experience psychological distress - speech and language therapy can help children develop the tools to effectively explore their feelings which in turn helps them to emotionally regulate and communicate what they need when they feel anxious or distressed. In counselling and psychotherapy, feelings (and coping strategies) are traditionally explored via talking therapies as well as the use of more creative therapeutic approaches including art and play, whatever the approach, communication is vital – therefore the earlier a child can access specialist speech and language support the better their wellbeing and mental health.

BATOD (British Association of Teachers of Deaf Children and Young People)

Deaf children and young people need to be able to access high quality speech and language provision, especially in the early years, provided by therapists who have specialist training in meeting the needs of deaf children and young people, as part of a wider system of support to deaf children that involves Qualified Teachers of Deaf Children and Young People and other staff and services from local authorities and educational settings, working together with staff from health.

Marie Gascoigne, Director, Better Communication CIC

Our work across the UK to support whole system change through the Balanced System continually identifies the importance of the speech and language therapy workforce as part of a whole system and the challenges to commissioning and recruitment of this specialist workforce. If we are to improve the outcomes for children and young people, investment in the speech and language therapy workforce is crucial and we welcome this debate.

Austin Willett, CEO, Different Strokes

Speech and language therapy is crucial for stroke survivors of all ages, helping them reconnect with the world and regain confidence in their communication. Different Strokes urges decision makers to put greater investment in these services, as they are essential for empowering survivors to lead independent, fulfilling lives.

Stephen Kingdom, Campaign Manager, Disabled Children's Partnership

The government will not be able to fix the current crisis in SEND if it does not address the shortages in specialist workforces, including in particular the need to invest in speech and language therapy.

Carol Boys, Chief Executive, Down's Syndrome Association

It is vital that Parliament prioritises an immediate and significant investment in speech and language therapy – we frequently hear from families who tell us the type and/or frequency of speech and language therapy intervention available through their local statutory service is insufficient to effect meaningful change in their child's communication skills. For almost all people who have Down's syndrome, effective and early support with their communication is vital in order for successful experience and inclusion in their education settings, and to set the

foundations for many key aspects of adult life – such as their ongoing education, building relationships and entering the workforce.

Dyscover

As a specialist, SLT-led aphasia charity, Dyscover supports Mikey Akers' Invest In SLT petition. Aphasia is a debilitating acquired communication disorder which has life changing, long term financial, social, educational and mental health impacts. People with aphasia and their families need specialist long term support and interventions to maximise their independence and their ability to participate in life. Timely and effective NHS funded acute and community rehabilitation for people with aphasia are essential foundations in the collaborative process of providing Dyscover's support services.

Alix Lewer, CEO, Include.org

Communication is essential to all aspects of life and in achieving your dreams; politicians know this better than anyone. We hope that investment in speech and language therapy services is recognised as an economic as well as an ethical priority.

Victoria Wadsworth, Chair, NAPLIC

Speech and Language Therapy transforms lives. When children and young people with Speech, Language and Communication Needs and their families receive the right support, they and their families can start to understand themselves and find ways forward. They can make their voices heard. Speech and Language Therapy impacts directly on language and communication, but indirectly on mental wellbeing, learning, behaviour and attainment. We see this time and time again.

Claire Dorer OBE, Chief Executive Officer, NASS (The National Association of Special Schools)

Access to qualified speech and language therapists is transformational for many children and young people with SEND. We want to see the shortage of therapists addressed to make this a reality and to create professional routes for therapists working in education settings.

Ruth Perry, Senior Policy Manager, Natspec

Speech and language therapy is often a critical part of preparation for adulthood for young people with more complex SEND. Unfortunately, the current shortage of SLTs means that some

16–25 year olds are not getting the support they need promptly or frequently enough – and sometimes not at all. We are very much hoping the government invests in building the specialist workforce to meet need, and that certainly includes SLTs.

Danni Manzi, Interim Associate Director of Policy & Health Strategy, Parkinson's UK

We are delighted that the debate on increasing investment in speech and language therapy will be taking place on 27 January 2025. Most people living with Parkinson's - a progressive neurological condition that commonly affects people's ability to talk and swallow - would benefit from speech and language therapy but cannot access the support they desperately need. This debate will provide an important opportunity to discuss the necessary improvements in accessing speech and language therapy, and prompt urgent action to invest in these services.

Robert Adamek, CEO, Rett UK

For people with Rett syndrome and their families, access to appropriately trained Speech and Language Therapists is vital. Developing communication skills through use of Augmentative and Alternative Communication strategies (especially eye pointing and eye gaze controlled speech generating devices) enables autonomy and self-determination and access to education, promotes health and well-being and improved family relationships and friendships, and improves quality of life. Rett UK fully supports the debate on Speech and Language Therapy services and urges the government to invest in this much needed profession.

Phil Thomason, Chair, SMiRA

Getting support for children and adults with Selective Mutism is a postcode lottery. There is no national pathway and despite speech and language services often being effective in supporting people with SM, in many areas they are not commissioned to do so, resulting in many people going unsupported or having to pay for private therapy.

Jane Harris, Chief Executive, Speech and Language UK

Speech and Language UK is pleased that the Petitions Committee has scheduled this debate. More specialist support for children with speech and language challenges is needed. Without the right support, children struggling with speech and language challenges are more likely to be behind in basic subjects at school, have worse mental health and be out of work as adults.

Kirsten Howells, Services Director, Deputy CEO, STAMMA

Speech and language therapy is often a vital support for children who stammer and their parents. And, as the focus on oracy increases in schools, there's a real risk that those children who find speaking more difficult could become increasingly marginalised. Speech and language therapists are vital to help children, families and teachers navigate those barriers so that children who stammer can access the curriculum and grow up as confident communicators regardless of their fluency. People who stammer are at greater risk of mental health difficulties because of all the barriers organisations and society throw in their way. Yet we see Speech & Language Therapy Services for adults who stammer at risk of closure due to lack of funding for specialist posts.

Kate Hopcraft & Debbie Honeysett, Symbol UK

At Symbol, our starting point is that anything is possible. With the right support, at the right time, progress in speech, language and communication skills can have real and valuable impact on the lives of the children, young people and adults, and their families and networks. From our work, we see that that with increased communication comes increased learning, engagement with others, positive relationships, and a reduction in challenging behaviour, and the impact of this can be felt throughout social care, health services and the justice system.

Sandra Ionno Butcher, Chief Executive, The National Organisation for FASD

Speech and language therapists are on the frontline of care for some of the country's most vulnerable, including those with neurodevelopmental conditions like FASD. This petition raised hope across our community that Parliament might seriously consider ways to increase funding and support that could lead to better communication and brighter futures for our loved ones.

For more information, please contact: peter.just@rcslt.org and elissa.cregan@rcslt.org

References

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For more information on long COVID, see the Royal College of Speech and Language Therapists' long COVID guidance:

<https://www.rcslt.org/members/clinical-guidance/long-covid/>