



Homeless Link

# Outreach Learning Forum Learning Disabilities

Thursday 8<sup>th</sup> June 2023  
10am-11.30am



# Learning disabilities and homelessness

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8<sup>th</sup> June 2023



# Outline

What are learning disabilities?  
How to recognise and screen  
Adjustments to support  
Accessing statutory services  
The learning disabilities toolkit



# What are learning disabilities?

Also known as intellectual disabilities.

To be diagnosed somebody must have:

- Significantly below average IQ (thinking skills)
- Significantly below average daily living skills
- Had these difficulties since childhood

NOT:

‘Specific learning disabilities’ (like dyslexia); Autism; ADHD etc. but may also have those diagnoses.



**1,130,000** adults with a learning disability in **UK**



**951,000** adults with a learning disability in **England**



**54,000** adults with a learning disability in **Wales**



**31,000** adults with a learning disability in **Northern Ireland**



<https://www.mencap.org.uk/>



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# People with a learning disability...

are disadvantaged in terms of:



educational attainment



work opportunities



reliance on benefits & public housing



social status & community participation<sup>10,11</sup>

are more likely to live:



in poverty<sup>12</sup>



with health inequalities<sup>10,11</sup>

and have:



lower life expectancy & greater risk of dying from avoidable causes<sup>12</sup>

# How to recognise learning disabilities: Thinking skills

Difficulties related to:

- Understanding information
- Reasoning skills
- Working memory (using a small amount of information long enough to complete a task)
- Needing more time to process information

# How to recognise learning disabilities: Daily living skills

Difficulties related to:

- Communication
- Accessing and using the community
- Day-to-day math and literacy
- 'Home' living (in whatever circumstance)
- Health and safety
- Leisure
- Self-care
- Self-direction
- Social relationships





# How to recognise learning disabilities: Thinking skills

You might notice they:

- Take a long time to answer questions, or avoid you asking them (e.g., talk at you a lot).
- Cannot focus their attention
- Cannot remember what you have said
- Do not seem to recognise 'social cues', e.g. hints the conversation is coming to an end.
- Take longer to learn new information.
- Get frustrated when given a lot of information. This frustration might turn into aggression.

# How to recognise learning disabilities:

You might find yourself:

- Having to explain things again and again, or in different ways because ‘they don’t get it’.
- Frustrated they don’t seem to ‘know’ what you have already told them.
- Noticing they struggle to solve problems logically.
- Giving more reassurance or support than usual, even for basic tasks.

# How to screen

You cannot diagnose, but you can screen:

- Think about whether and how to raise it
- Who is the best person to have the conversation: trusted, reasonable relationship
- How will you raise it? e.g., does the person prefer very direct communication? Or might you start with “*I was in some training the other day about learning disabilities and I wondered if anybody had ever talked to you about learning disabilities?*”

# How to screen

You cannot diagnose, but you can screen:

- Does the GP have any record of learning disability?
- What school did they go to? ('special school'?)
- Do they have any qualifications?
- Have they ever worked in 'skilled' / 'unskilled' jobs?
- Have they ever run their own tenancy?
- Do they refer to themselves as 'thick' etc.?
- Do they seem isolated or socially vulnerable?

You might use the Learning Disability Screening Questionnaire:

<https://learningdisabilitymatters.co.uk/adult-learning-disability-form/>

# Social vulnerability: 'Mate crime'

Form of disability hate crime.

Describes befriending for exploitation, including:

- Being defrauded / made to give money
- Cuckooing (having your home taken over)
- Being used to commit crimes for other people
- Sexual exploitation

Can contribute to / cause homelessness, contact with the criminal justice system, and mental and physical health problems.

# Diagnosis

- ❑ **IQ assessment** (psychologist)
- ❑ **Adaptive functioning** (daily living skills) (psychologist or occupational therapist)
- ❑ **Early developmental history** (often difficult for people who are street homeless)

Community Learning Disability Teams (CLDTs) within NHS  
Referrals via GP or sometimes direct – check local services.  
CLDTs might not be aware of NICE homelessness guidelines:  
share it!

# Adjustments to support: legal requirements

Equality Act 2010 and [The public sector Equality Duty](#)

Reasonable adjustments to the way services operate, so as to remove or minimise disadvantages related to disability.

[Substance misuse in people with learning disabilities: reasonable adjustments guidance - GOV.UK \(www.gov.uk\)](#)

The screenshot shows the GOV.UK website header with the logo and a search bar. Below the header is a breadcrumb trail: Home > Health and social care > Disabled people > Disability rights > Substance misuse and people with learning disabilities. The main content area features a blue header with the text 'Guidance Substance misuse in people with learning disabilities: reasonable adjustments guidance' and 'Published 8 May 2016'.

- Contents
- Introduction
- The prevalence of substance misuse in people with learning disabilities
- Why people with learning disabilities misuse substances
- Effects of substance misuse
- Services available for substance misuse
- Barriers to substance misuse treatment
- What do we know about what works
- Capacity and consent

## Introduction

This guidance summarises what the research tells us about the particular problems faced by people with learning disabilities who have substance misuse problems. There is information about which approaches work best and resources for those supporting them.

## The prevalence of substance misuse in people with learning disabilities

Some people with learning disabilities misuse alcohol or illicit drugs and some misuse prescribed medications. Various studies have looked at the extent of substance misuse



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[Learning disabilities: applying All Our Health - GOV.UK \(www.gov.uk\)](#)

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- Contents
- Introduction
- What is a learning disability?
- Prenatal
- Perinatal
- Postnatal
- Facts: health and people with a learning disability
- Core principles for health professionals
- Interventions
- Guidance

## Introduction

Individuals regardless of their age, gender or label should receive care that is based on their unique needs, that is appropriate in its design and effective in its delivery.

## What is a learning disability?

A learning disability, not to be confused with a learning difficulty such as dyslexia and dyspraxia, is a label given to a group of conditions that are present before the age of 18. This impacts on the way individuals develop in all core areas, and ultimately how they live their lives and access health care.

" A learning disability needs to be viewed as a 'complex way of being'."

[Print this page](#)

# Adjustments to support: How are you going about it all?

Are you:

- Using straightforward language, explaining jargon?
- Using short sentences and giving time to respond?
- Giving them information in writing too (if safe for them to have it where others might access it)?
- Adjusting contacts: low stimulus environment; length and frequency of seeing them; breaks?
- Breaking tasks down into simple steps?
- Checking their understanding by asking them “*Can you just repeat back what I have said so I can check I’ve been clear?*” (not “*do you understand?*”)



# Adjustments to support: How accessible is your service?

Has your organisation:

- implemented the 'Accessible Information Standard?' (2016)

<https://www.e-lfh.org.uk/programmes/accessible-information-standard/>

- produced 'easy read' information?

- built questions into assessment paperwork about communication needs?

- Trained staff in communication awareness? Free courses:

<https://communication-access.co.uk/>

# Adjustments to support: Physical health

GPs should offer an 'annual health check' to anybody with a learning disability:

<https://www.nhs.uk/conditions/learning-disabilities/annual-health-checks/>

Hospitals often have a 'Learning Disability Liaison Nurse':

<https://www.nhs.uk/conditions/learning-disabilities/going-into-hospital/>

# Social Care

*Needs assessments* under The Care Act 2014

*Housing Act (1996)*: priority need if vulnerable due to learning disability

*Safeguarding*: duty to those with care and support needs

*Capacity assessments* relating to specific decisions, where there is reason to doubt capacity

# LEARNING DISABILITIES AND HOMELESSNESS



<https://groundswell.org.uk/wpdm-package/learning-disabilities-and-homelessness/>

<https://homeless.org.uk/knowledge-hub/learning-disabilities-and-homelessness-toolkit/>



Dylan has some suggestions about what he needs workers to do, which are likely to be helpful for other people with a learning disability:

### ***Promoting safety***

Dylan often doesn't feel safe. He feels really vulnerable, like people know he's an easy target to exploit for money etc. Workers helping him feel safe and attending to this helps. You can help somebody by looking out for signs that they are vulnerable to exploitation or abuse. Talk to them about your concerns and support them to understand how people should and should not treat them. You might share information on 'mate crime'. Give the person as much choice and control as possible in deciding what action to take to stay as safe as possible.

*Showing you really care*

*Soothing*

*Help getting involved in activities*

*People understanding special needs helps*

*The move to online services is hard*

# So, what can we all do?

- Read and share the toolkit with relevant services
- Use the resources section to find out more
- Always hold learning disability in mind as a possibility
- Connect with your local learning / intellectual disabilities mental health services and commissioners and promote inclusion of those facing multiple exclusion
- Inculcate, advocate, escalate...

# Thank you

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# Breakout Groups

15 mins



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Discuss how you can adapt your ways of working when supporting someone with a learning disability.

For example, changing assessment formats/settings, communication styles etc.



# Case study

Sam is a 28-year-old who was recently released from prison to no address. Sam is estranged from family due to them calling Sam 'lazy' and telling Sam to leave home due to incidents of aggression.

Other people known to the outreach team have said a well-known individual has been getting Sam to regularly shoplift in return for very small amounts of money, food, and occasionally alcohol.

Sam tends to sleep alone and tucked away from other people. When the outreach team first approached, Sam appeared very anxious and asked "Am I in trouble?". Sam reported having no money, income or bank account, eventually admitting to being unsure of how to get one.

When asked a question, Sam can take a long time to answer and sometimes looks angry, even if the question seems fairly neutral. On a couple of occasions, Sam has had angry outbursts at outreach team members when they have asked questions, first shouting at them "I don't know" and then yelling at them to "f\*\*\* off" before storming off.

The team feel a bit stuck with how best to help Sam.

# Case Study



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What are the signs that Sam may have a learning disability?

What could you do to support/engage with Sam?



# Homeless Link

## What we do

Homeless Link is the national membership charity for frontline homelessness services. We work to improve services through research, guidance and learning, and campaign for policy change that will ensure everyone has a place to call home and the support they need to keep it.

[homeless.org.uk](https://homeless.org.uk)

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