



Mind the Gap: Language Development is Key for Inclusive Education and Wellbeing

Wednesday 26th March 2025





Our vision and ambition for language needs



Maria J Arche
University of
Greenwich, UK



Angeliek van Hout
University of Groningen,
NL



Alexandra Perovic
University College
London, UK



Josep Quer
ICREA-Pompeu
Fabra, Spain



Jeannette Schaeffer
University of
Amsterdam, NL



Petra Schulz
Goethe
University,
Germany

***Mind the gap: Language Development is Key for Inclusive Education and Wellbeing
British Academy & Wellcome Trust, 26th and 27th March 2025***

This talk

- Who we are
- Our aims & ambition for this conference
- Some milestones
 - Manifesto
 - EU COST Action
 - Research results: Scoping Review



Linguists



Maria

Theoretical linguistics, native and non-native speakers' grammars



Angeliek

First language acquisition in typically developing children



Alexandra

Grammar in clinical populations: autism, Down and Williams syndrome, DLD



Josep

Theoretical linguistics, sign-language grammars



Jeannette

First language acquisition; grammar in clinical populations: autism, DLD



Petra

First language acquisition, bilingualism; DLD

Working in close
collaboration with



Karen Bryan
York St John University

Speech &
Language
Therapy



Derek Munn
UK Royal College
Speech & Language
Therapists

Director of
Policy & Public
Affairs



Erika
Kalocsanyiova
University of
Greenwich

Multilingual
pedagogies



Jean Gross

UK
Government
Advisor
Disadvantaged
children
Special
education
needs



Anne Baker
University of
Amsterdam

Psycholinguistics,
Sign languages



Ellen Gerrits
Utrecht University

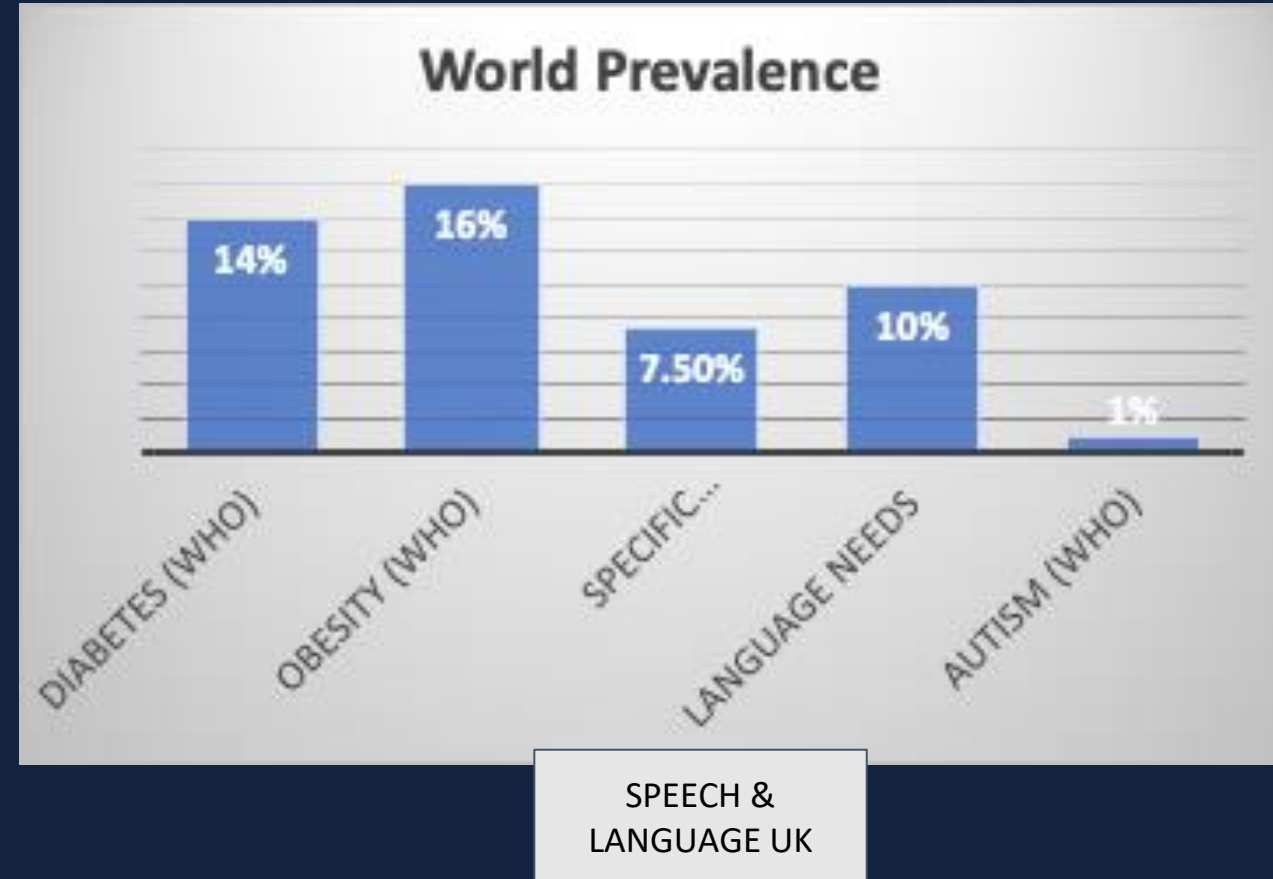
Speech &
Language
Therapy

Wanting to build *with*
many other authors and
organizations

The ATLAS Project

Our impetus. A realisation about:

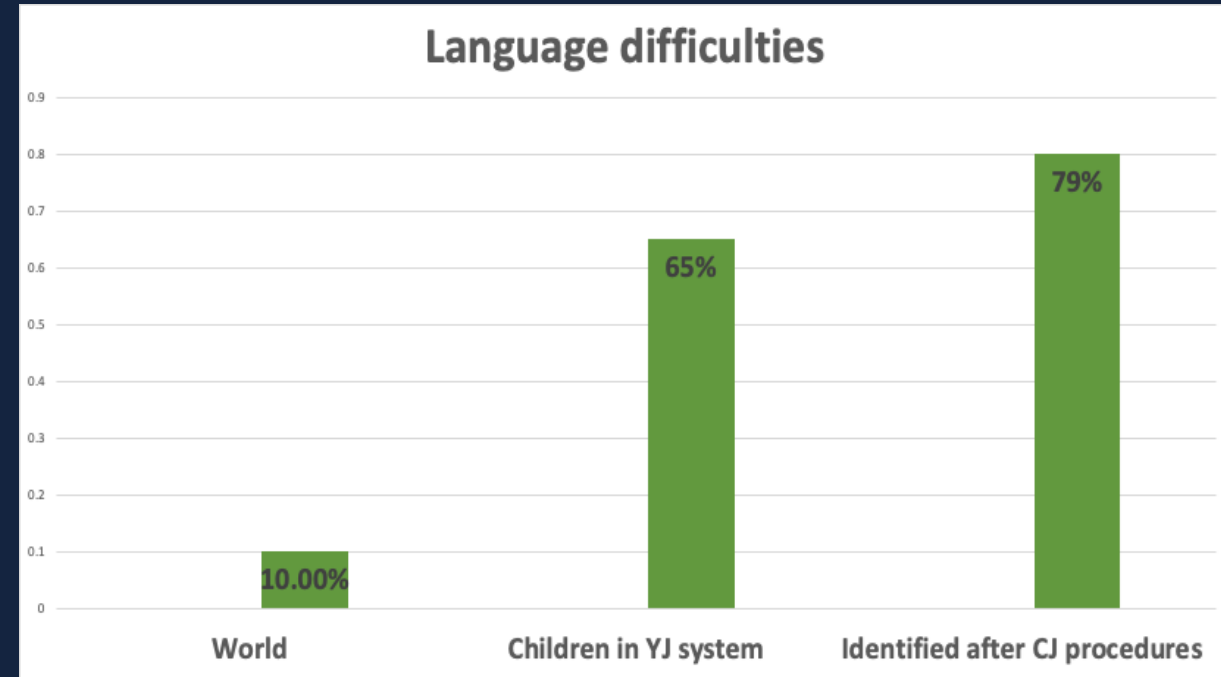
1. Low awareness of language as the gateway to engage with the world
2. Gaps in the chart of language development (scarce knowledge 6-onwards)
3. Scattered knowledge about language development across disciplines
 - Limited exchange of knowledge



The ATLAS Project

Our impetus. A realisation about:

4. Disparity in methods
(standardised vs other tasks)
4. Very serious consequences of
lack of identification of language
needs and relevant intervention
(shared with other disciplines and
stakeholders)



Bryan et al. 2007, 2015
Youth Justice Plan Milton Keynes 2022

The ATLAS Project

❖ Our aims, actions and ambitions for this conference and beyond:

1. **Raise Awareness** of language needs: Manifesto
2. **Document and foster** research throughout the developmental lifespan, incl. late childhood & adolescence
3. **Document** tendencies in focus across areas and **connect** disciplines (linguistics, speech and language therapy, psychology and education) – by establishing networks where they collaborate (ATLAS, EU COST Action)
4. **Foster interdisciplinary input in** diagnostic tools
5. **Enable addressing social consequences** of language needs: EU COST Action

**CREATE platforms, networks and an atmosphere of mutual understanding
to deliver change effectively**

Some milestones



Netherlands Institute
for Advanced Study
in the Humanities and
Social Sciences

ATLAS-Leiden Manifesto

Think Language First





Early Day Motions

UK Parliament > Early Day Motions > The Leiden Declaration and support for children with speech and language difficulties

The Leiden Declaration and support for children with speech and language difficulties



[HOME](#) [MANIFESTO](#) [TEAM](#) [ACTIVITIES](#) [CONTACT](#)

55+endorsed

A MANIFESTO CALLING FOR BETTER UNDERSTANDING, RECOGNITION AND SUPPORT OF LANGUAGE DIFFICULTIES – AN INVISIBLE DISADVANTAGE

Launch: House of Lords, London, 30th January 2024

Our endorsers

The Manifesto has been endorsed by the following organisations (in alphabetical order) so far:



Search

Recent Posts

Manifesto to launch at House of Lords, 30th January 2024

Bilingual Narrative Intervention, February 23, 2023

Language Development during School Years, June 2022

LAGB Belfast, September 2022

Workshop Lorentz centre at Leiden "Language development in the school


MANIFESTO

 Endorse

The ATLAS Leiden Declaration: Think Language First!

A co-created output from workshop

- Sponsored by NIAS-Lorentz, NWO, KNAW, Universities of Leiden and Greenwich
- Around 40 hours
- €25,700 funding
- 60+ participants
- 10 countries
- Multidisciplinary & multi-sectoral
Linguists, speech and language therapists (researchers and clinicians), paediatricians, lawyers, education consultants, health economists, parent associations, professional bodies, student clinicians and linguists



NIAS
Lorentz center
Workshop @Snellius

Language Development, Diagnosis and Assessment in School Ages (6-16)
27 September - 1 October 2021, Leiden, the Netherlands

Scientific Organizers

- Maria Arche, University of Greenwich
- Anneliek van Hout, University of Greenwich
- Karen Bryan, York St John University
- Ellen Smit, HU University of Applied Sciences Utrecht

Topics

- Language Needs: Introduction and Context
- Charting Language Development during the School Years
- Language Assessment and Academic Performance
- Language Intervention and Support
- Taking Stock and Ways Forward

The Lorentz Center organizes international workshops for researchers in all scientific disciplines. Its aim is to create an atmosphere that fosters collaborative work, discussions and interactions. For registration see: www.lorentzcenter.nl

This workshop is part of the NIAS-Lorentz Program, which brings together perspectives from Humanities & social sciences with Natural & technological sciences.

NIAS is a research institute with a short association with the University of Leiden and the University of Greenwich. Please design: Tjallingii & Boudier, NL


University of Leiden
University of Greenwich
NIAS
Lorentz center

www.lorentzcenter.nl

EU COST Action

*Justice to Youth Language Needs: human rights undermined by
an invisible disadvantage*

CA22139 - Justice to youth language needs: human rights undermined by an invisible disadvantage (Y-JustLang)

 Downloads



YouthJusticeLanguage



EU COST Action CA 22139

Leadership

Maria Arche (Chair), Josep Quer (Vice-Chair), Alexandra Perovic (SciComm coordinator), Gordana Hrzica (Grant awarding coordinator)

Working group leaders:

Caterina Donati & Beatrice Giustolisi, Karen Bryan & Jeannette Schaeffer, Philippe Prevost & Ana Lucia Santos, Elaine Williams, Els Dumortier & Mai Fleetwood Bird, Vina Tsakali.

<https://www.cost.eu/actions/CA22139/>

<https://youthjusticelanguage.org/>

Justice to Youth Language Needs: human rights undermined by an invisible disadvantage

Working Groups

Number	Title	Leader
1	Identification of linguistic phenomena key to youth justice	Prof caterina DONATI ✓
2	Blueprint of language screening tools for the youth justice system	Prof Karen BRYAN ✓
3	Inventory of language abilities tests for youth offenders	Dr Philippe PREVOST ✓
4	Epidemiology of youth offending	Dr Elaine WILLIAMS ✓
5	Legal frameworks for the youth justice system	Prof Els DUMORTIER ✓
6	Training and dissemination	Dr Alexandra PEROVIC ✓

MULTI DISCIPLINARY

MULTI SECTORAL

MULTI NATIONAL

- Linguists
- Speech & Language Therapists
- Criminologists, health professionals, youth justice services, education services
- Judges, lawyers, police

*Justice to Youth Language Needs:
human rights undermined by an invisible disadvantage*

Albania	Germany	Norway
Armenia	Hungary	Poland
Austria	Italy	Portugal
Belgium	Ireland	Romania
Bosnia and Herzegovina	Kosovo	Serbia
Croatia	Lebanon	Slovenia
Cyprus	Moldova	Spain
Denmark	Montenegro	Turkey
France	Netherlands	Ukraine
Greece	North Macedonia	United Kingdom

30
countries

190
Members
03/2025

Brussels
Kick-off

Zagreb
*Bridging
Language in
Criminal
Procedures
with
Participatory
Action
Research*

Lisbon
*Systems and
contexts of
the children in
(potential)
conflict with
the law*

Zagreb
*Children in
conflict with
the law and
their language
difficulties*

Bergen
*Minding the
gap between
language
needs and
education pre,
during and
post prison*

Crete
*Language
development
in
adolescence.
Late
acquisition,
multigrammars
and
impairments*

Warsaw
*The language
factor across
disorders*

OCT 2023

MAY 2024

SEPT 2024

DEC 2024

FEB 2025

APR 2025

SEPT 2025



Scoping review:

Overview and preliminary results

Scoping review: overview

❖ Definition

A scoping review systematically maps key concepts, evidence, and research gaps in a broad topic area

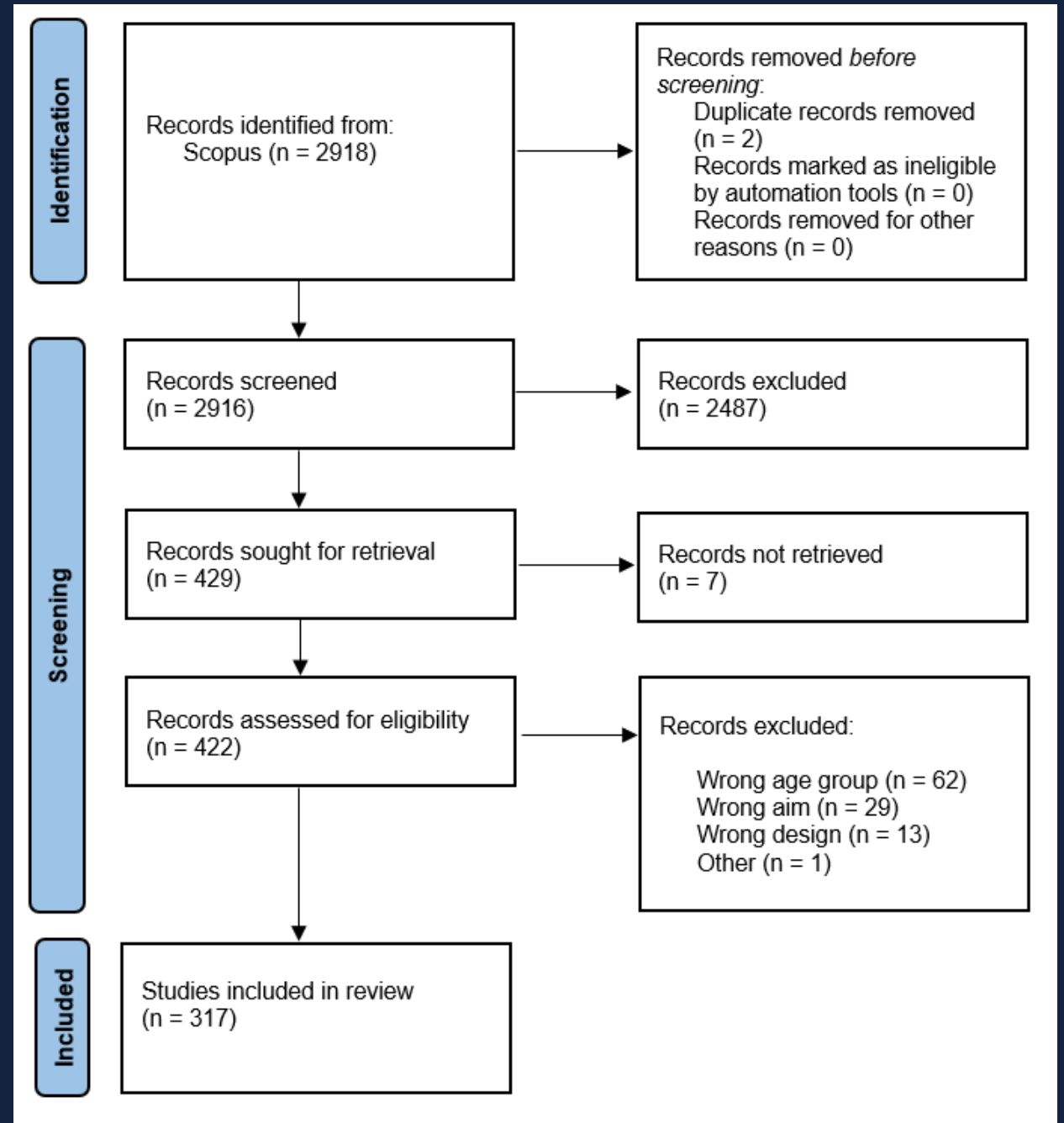
❖ Our aim

Establish the state of the art in research on language development **from age 6 onwards** across diverse populations and disciplines

Process and methods

Database searches: Feb 2022,
updated in Nov 2024

Includes: original, peer reviewed
research focussed on first
language development
(including bi- or multilingual) in
children and adolescents aged 6
to 16 published post-2012



Preliminary results

Scarce research/ knowledge 6 onwards?

DLD: 101

Autism Spectrum: 48

Deaf/Hard H: 25

Down and Williams synd: 7

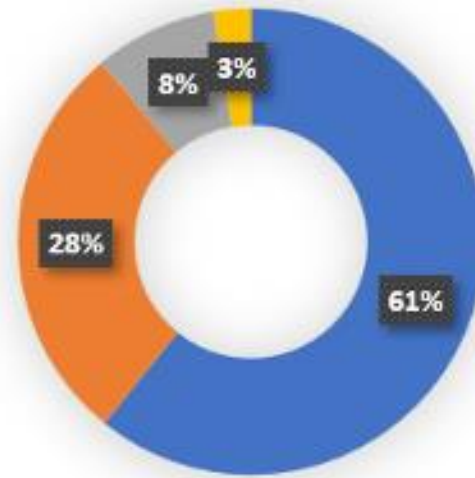
Other: 17

TD (main focus): 110

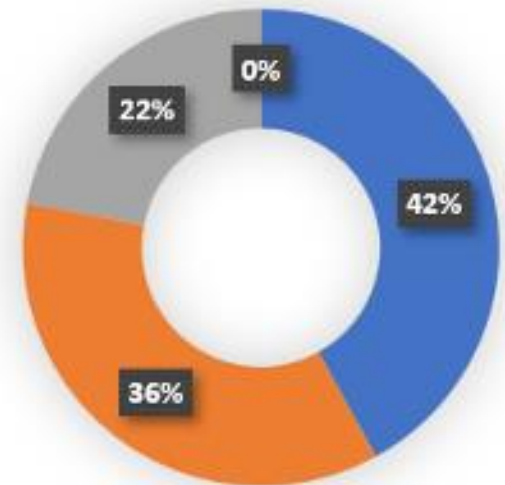
TD (control/comparison): 123

TD (mono vs bi- or multi): 42

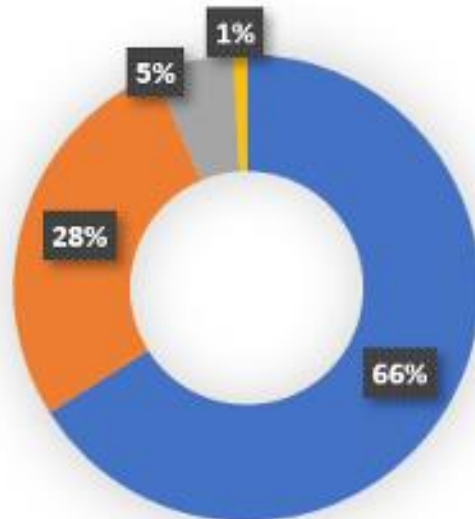
Typical development



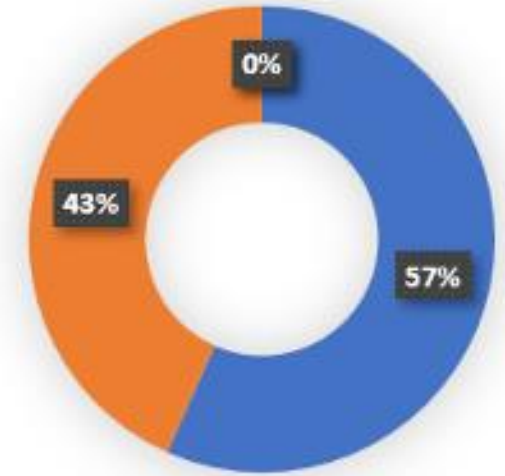
Autism spectrum



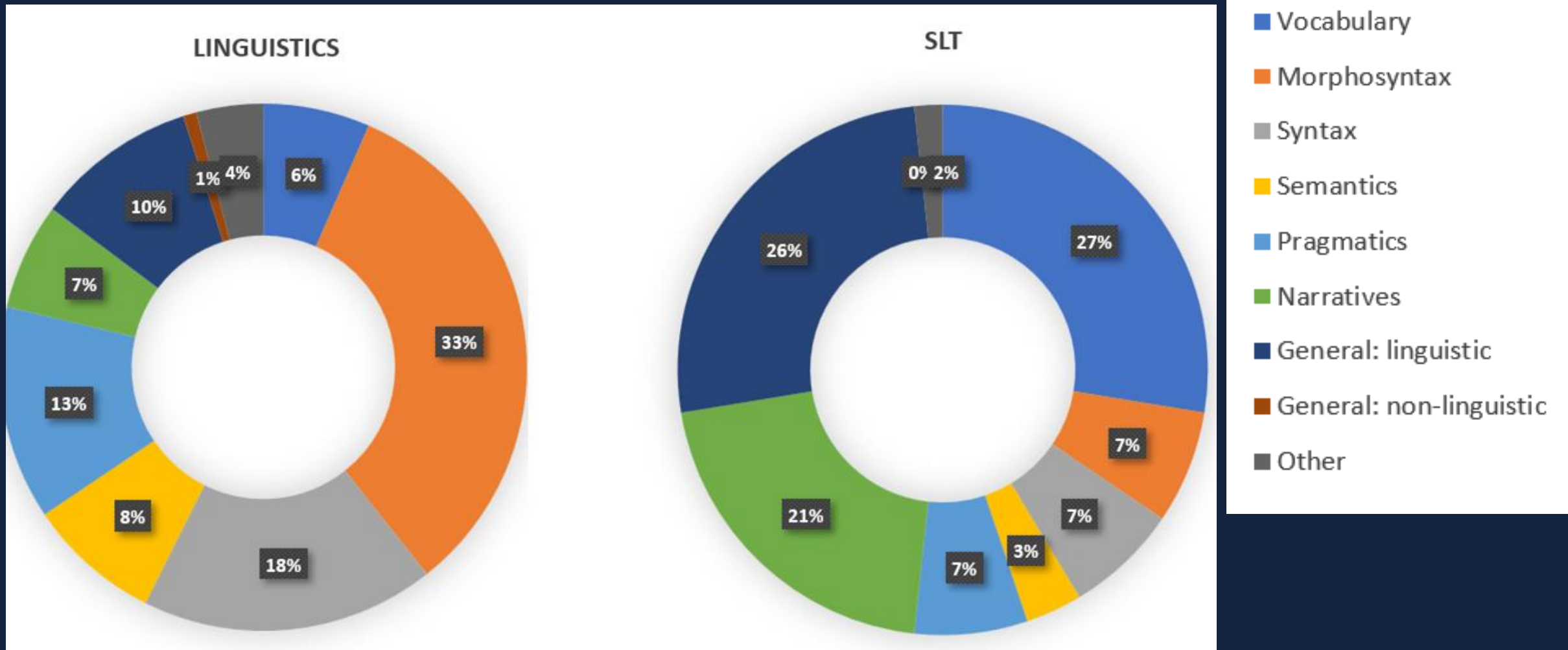
Developmental language disorder



Deaf and hard of hearing



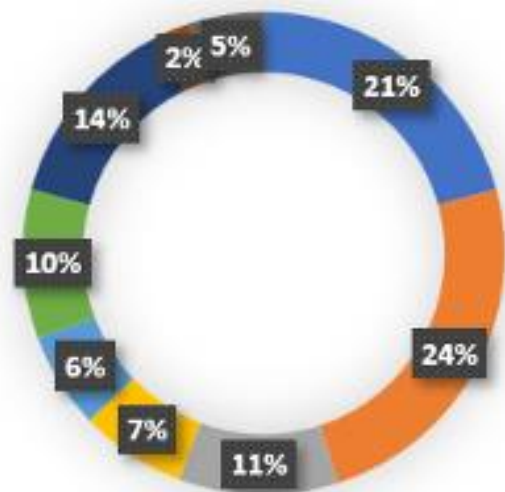
Scattered knowledge across disciplines...



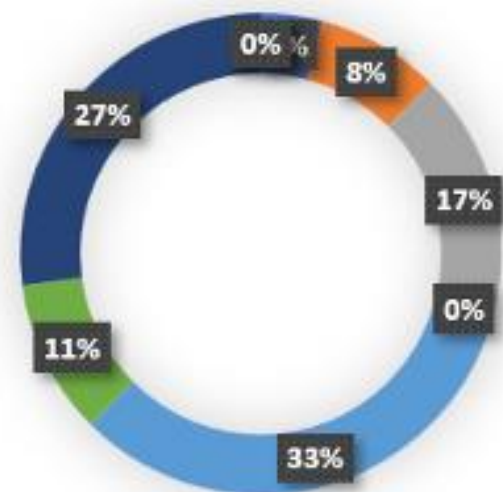
... and populations

- Vocabulary
- Morphosyntax
- Syntax
- Semantics
- Pragmatics
- Narratives
- General: linguistic
- General: non-linguistic
- Other

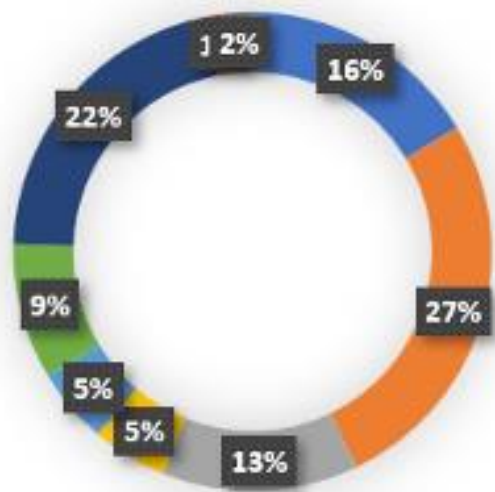
Typical development (TD)



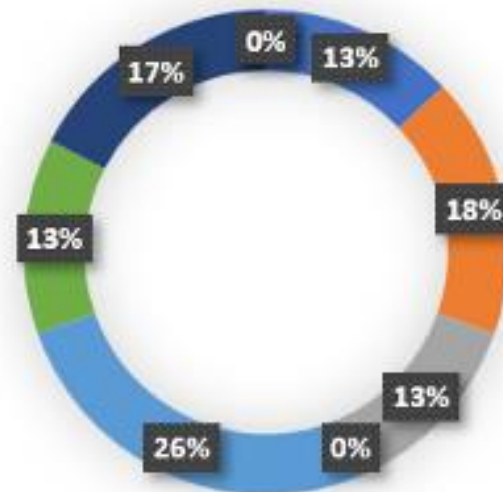
Autism spectrum (AS)



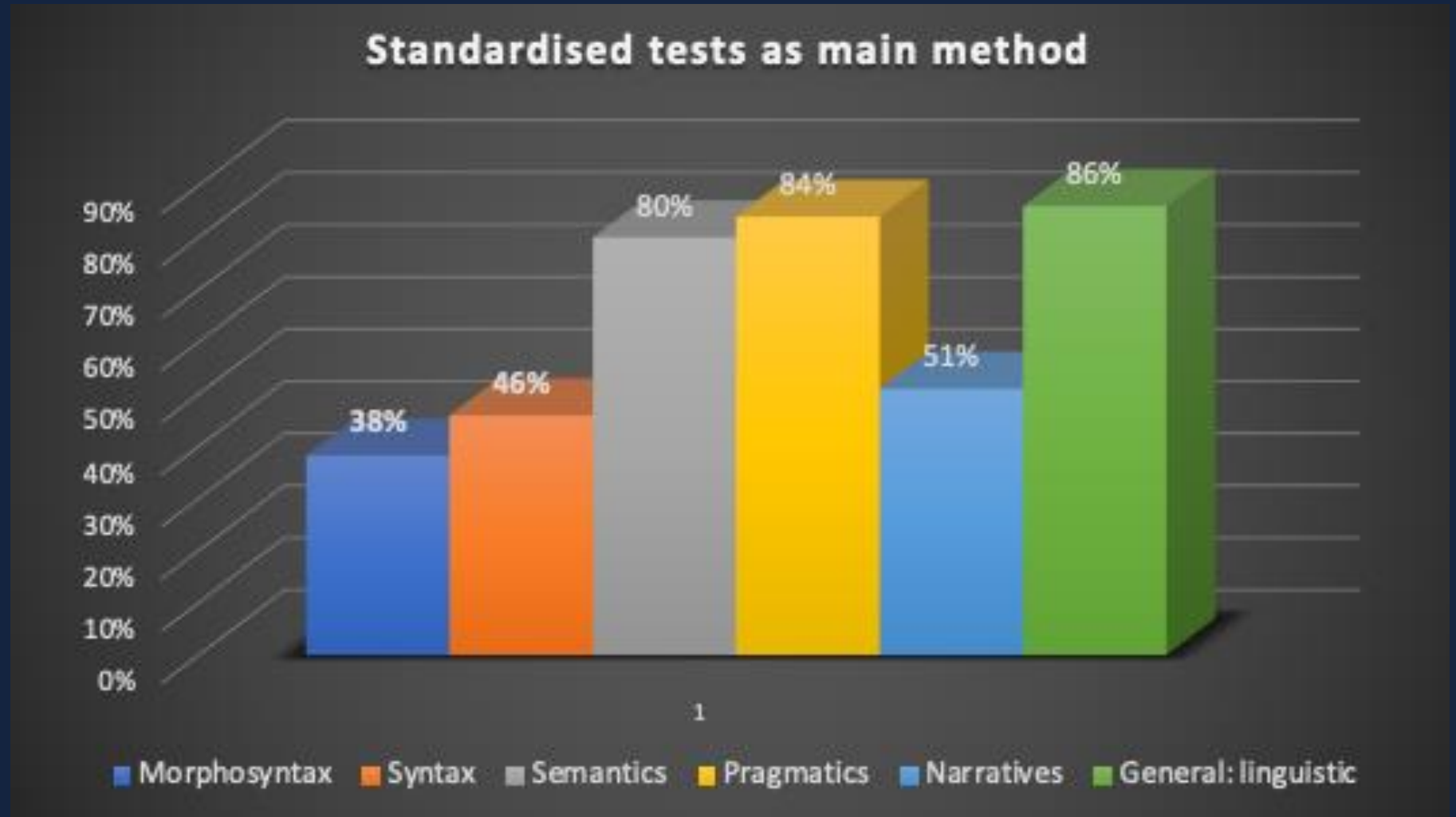
Developmental Language Disorder (DLD)



Other (including DS and WS)



Standardised
vs researcher-
developed
assessment
across
domains



Key takeaways

- ❖ Continuous efforts needed to raise awareness of language and its development
- ❖ Research on language development in adolescence remains scarce and must be expanded
- ❖ Cross-disciplinary knowledge exchange, communication and collaboration must improve
- ❖ Methodological discussions are essential for fostering mutual understanding and collaboration
- ❖ Dedicated spaces where disciplines work together must be created
- ❖ Curriculum content in SLT, linguistics and psychology should integrate collaborative and co-creative approaches to prepare the future generations of professionals

We are calling for your collaboration to

- ❖ Build bridges of knowledge and communication across disciplines
- ❖ Identify gaps in knowledge and across services
- ❖ Contribute to the workforce needed to deliver the change

Thank you!



ThinkLanguageFirst@gmail.com



Session 1: Language is health

10:00-12:45

Chair: Jeanette Schaeffer

This session will discuss the role of health services in the web of sectors that need to be involved in the identification of language needs, featuring case studies.



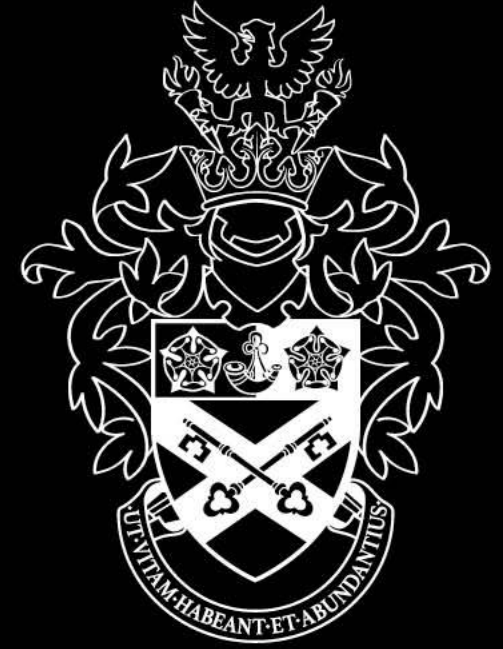
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Incidence of speech, language and communication difficulties in young offenders: opportunities to identify difficulties earlier

Professor Karen Bryan OBE
March 2025





Contents:

- Incidence of Speech, language and communication difficulties (SLCD) in young offenders
- Language development and compounding risks for offending
- Adolescent language development and mental health
- Profile of a young offender
- Challenges for services involving children and young people

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A photograph showing the silhouettes of seven children walking along a beach at sunset. The children are walking from left to right, and their reflections are visible in the shallow water on the sand. The sky is a warm, hazy orange, and the sun is low on the horizon, creating a bright glow. The children are dressed in casual clothing, and their movements are captured in a candid, naturalistic style.

Statistics for children (10-17 years)

In the year ending March 2024 (published Jan 2025)



The number of proven offences committed by children increased for the second consecutive year, rising by 4% to around 35,600.

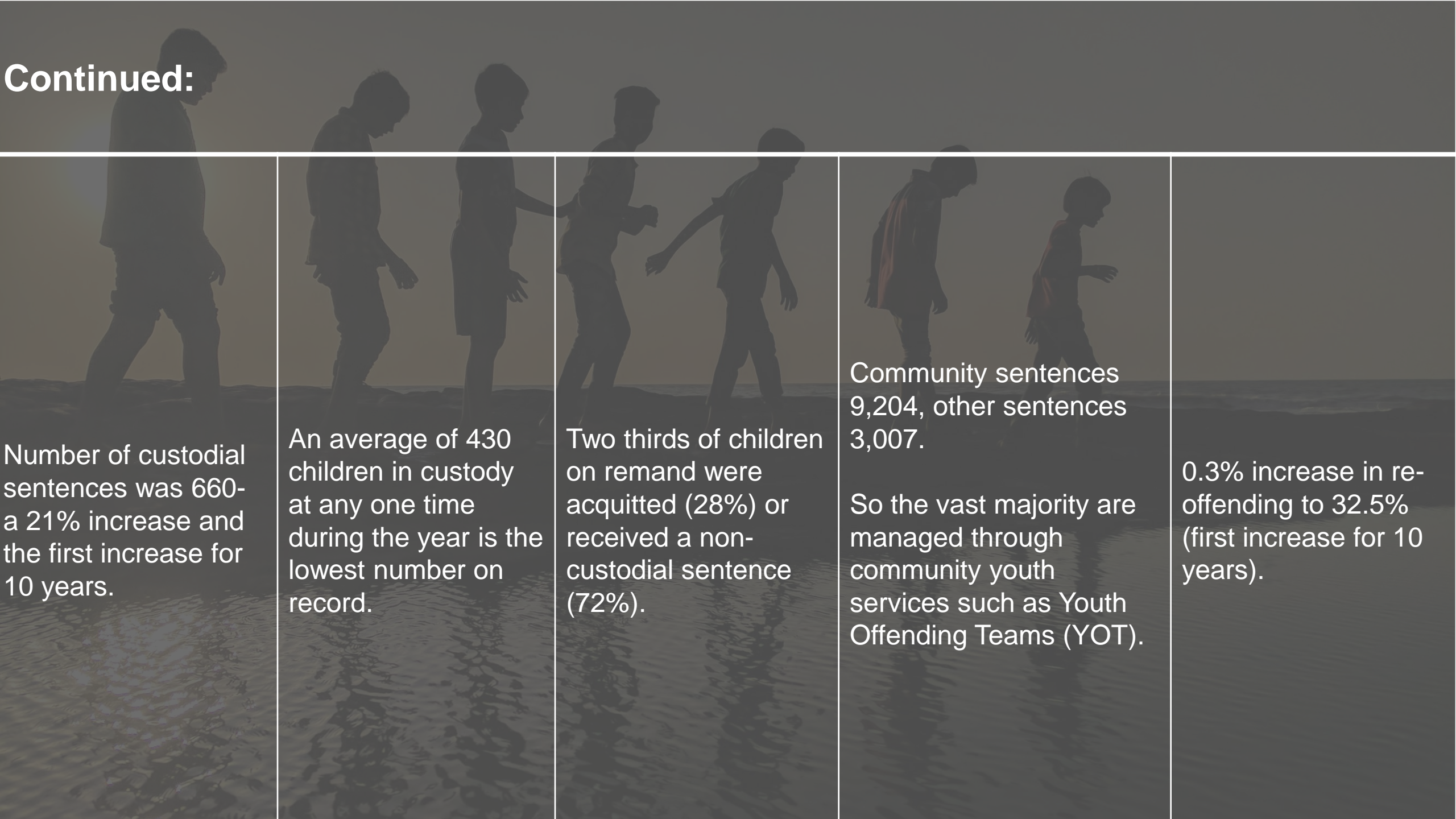
The largest increase was seen in sexual offences- 47% rise compared to 2023 to around 1,400 proven offences. (The highest number since 2018).

Violence against the person offences increased by 5% compared to 2023 and accounted for over a third (34%) of all proven offences.

Increases in the acquisitive offence groups of theft and handling, robbery, and burglary, rising by 32%, 12% and 8% respectively compared to 2023.

There were just over 3,200 knife or offensive weapon offences resulting in a caution or sentence committed by children. This is a fall of 6% compared with the previous year and the sixth consecutive year-on-year decrease, though 20% higher than 10 years ago.

Continued:

The background of the entire slide is a photograph of children walking on a beach at sunset. The children are silhouetted against the bright orange and yellow sky. Their reflections are visible in the wet sand. The image is divided into five vertical panels by thin white lines.

Number of custodial sentences was 660- a 21% increase and the first increase for 10 years.

An average of 430 children in custody at any one time during the year is the lowest number on record.

Two thirds of children on remand were acquitted (28%) or received a non-custodial sentence (72%).

Community sentences 9,204, other sentences 3,007.

So the vast majority are managed through community youth services such as Youth Offending Teams (YOT).

0.3% increase in re-offending to 32.5% (first increase for 10 years).

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Young People in Adult prisons (Sturge 24)

In November 2024, there were 87,000 adults in prison.



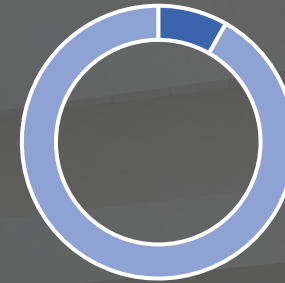
0.3%

Age 15-17 (264)



4%

Age 18-20
(3,090)



9%

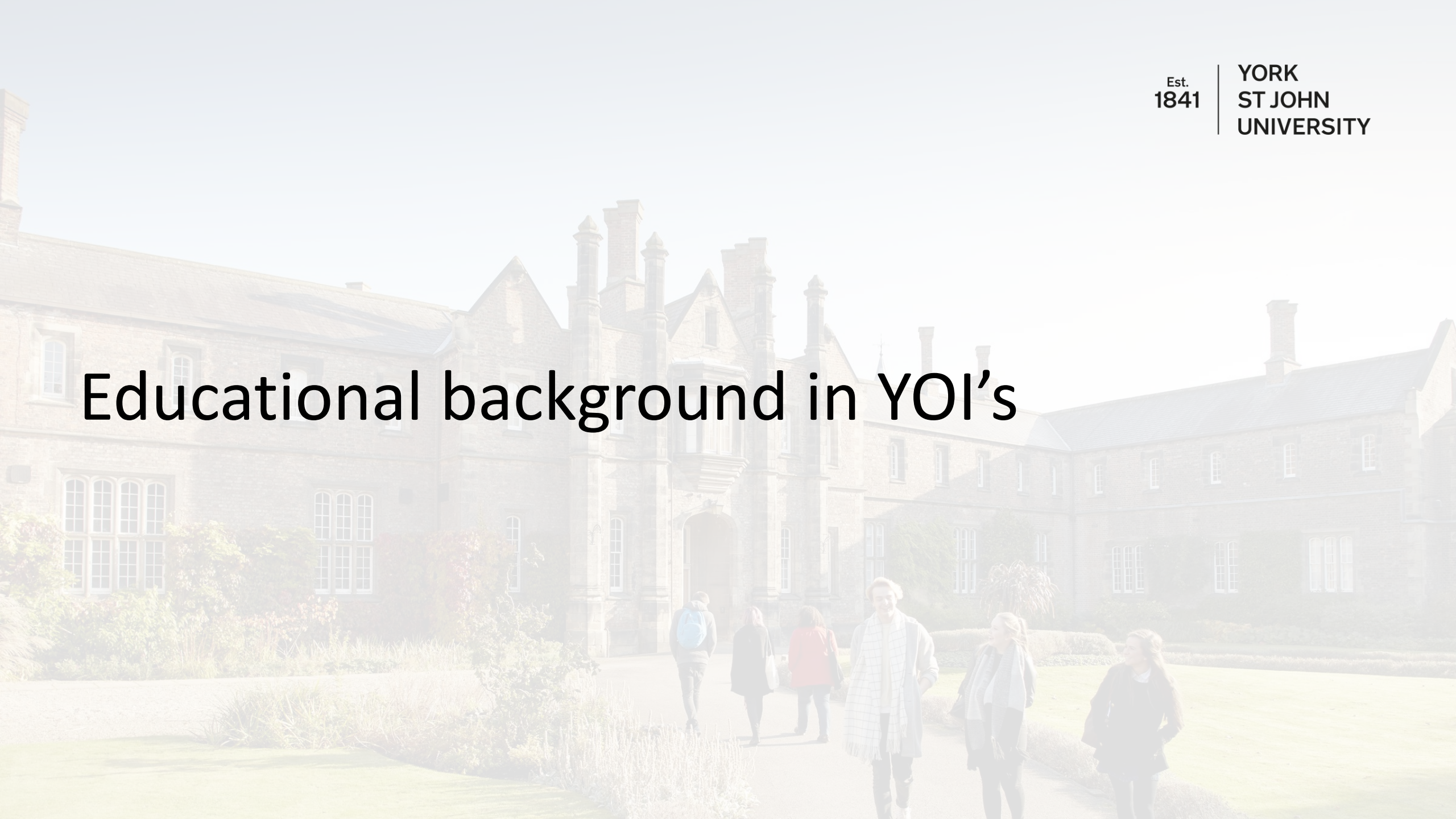
Age 21-24
(8,155)

Given the 32% re-offending rate, and longer sentences, I have previously calculated that around 415 Young offenders enter the adult prison estate each year.

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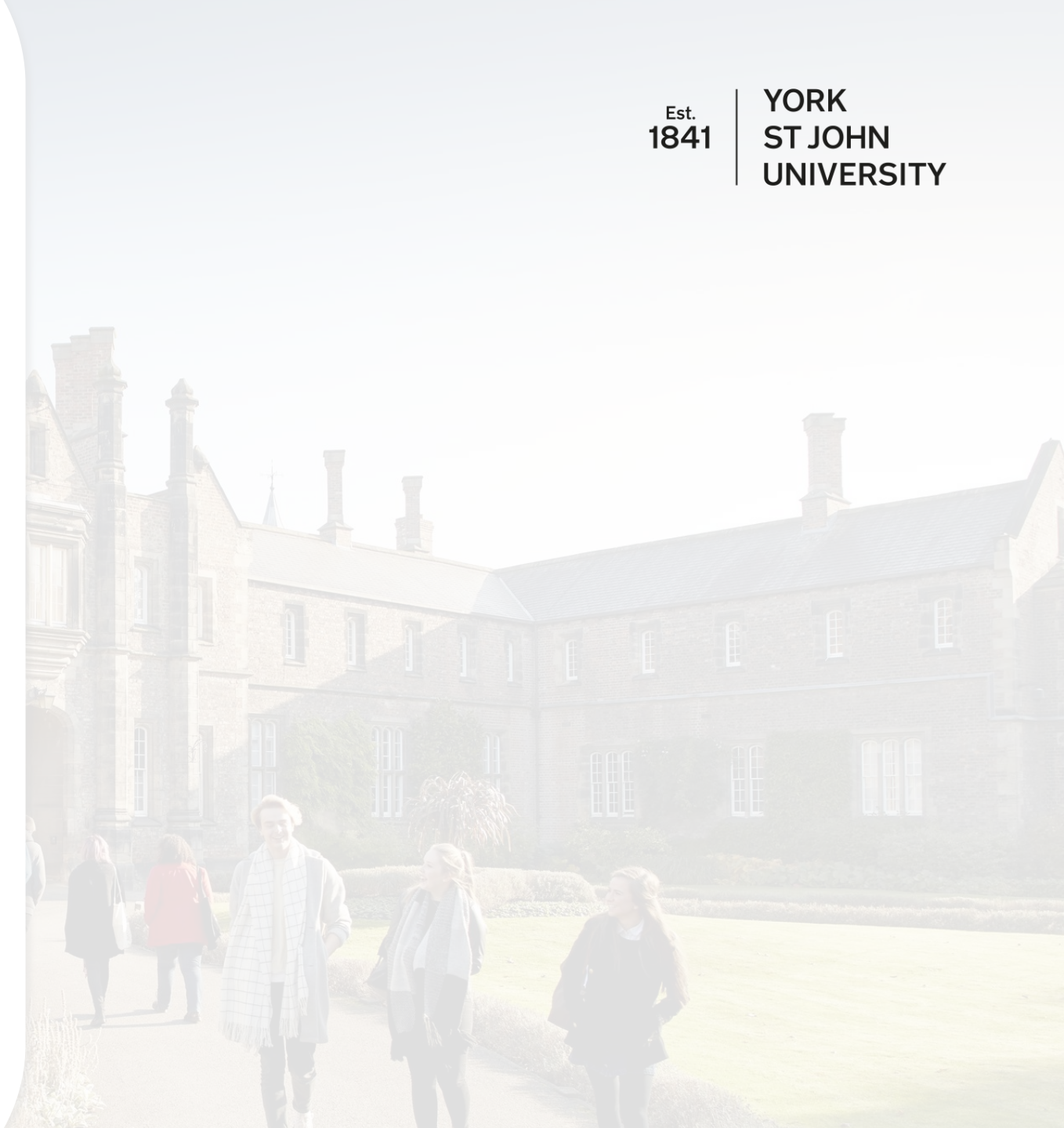
Educational background in YOI's



90% of those sentenced to custody for less than 12 months were persistently absent from school with 23% permanently excluded.

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90% of those sentenced to custody for less than 12 months were persistently absent from school with 23% permanently excluded.

36% of boys and **41%** of girls were 14 or younger when they ceased to attend school (Murray 2012).

In the youth CJS, **25%** have special educational needs, 46% are under-achieving at school and 29% have difficulty with literacy and numeracy (YJB 2013).

1% of those sentenced less than 12 months (academic year 12-13) achieved 5 GCSEs including English and maths.

HMIP (2024) decline in educational opportunities due to staff shortages, poor leadership, increasing isolation leading to poor behaviour and further restrictions.

Hampson and Day (2025) suggest that Detention and Training Orders (DTOs) are not working, particularly where a short custodial sentence disrupts education and all other aspects of a child's life.

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Not benefitting from the
protective effects of education

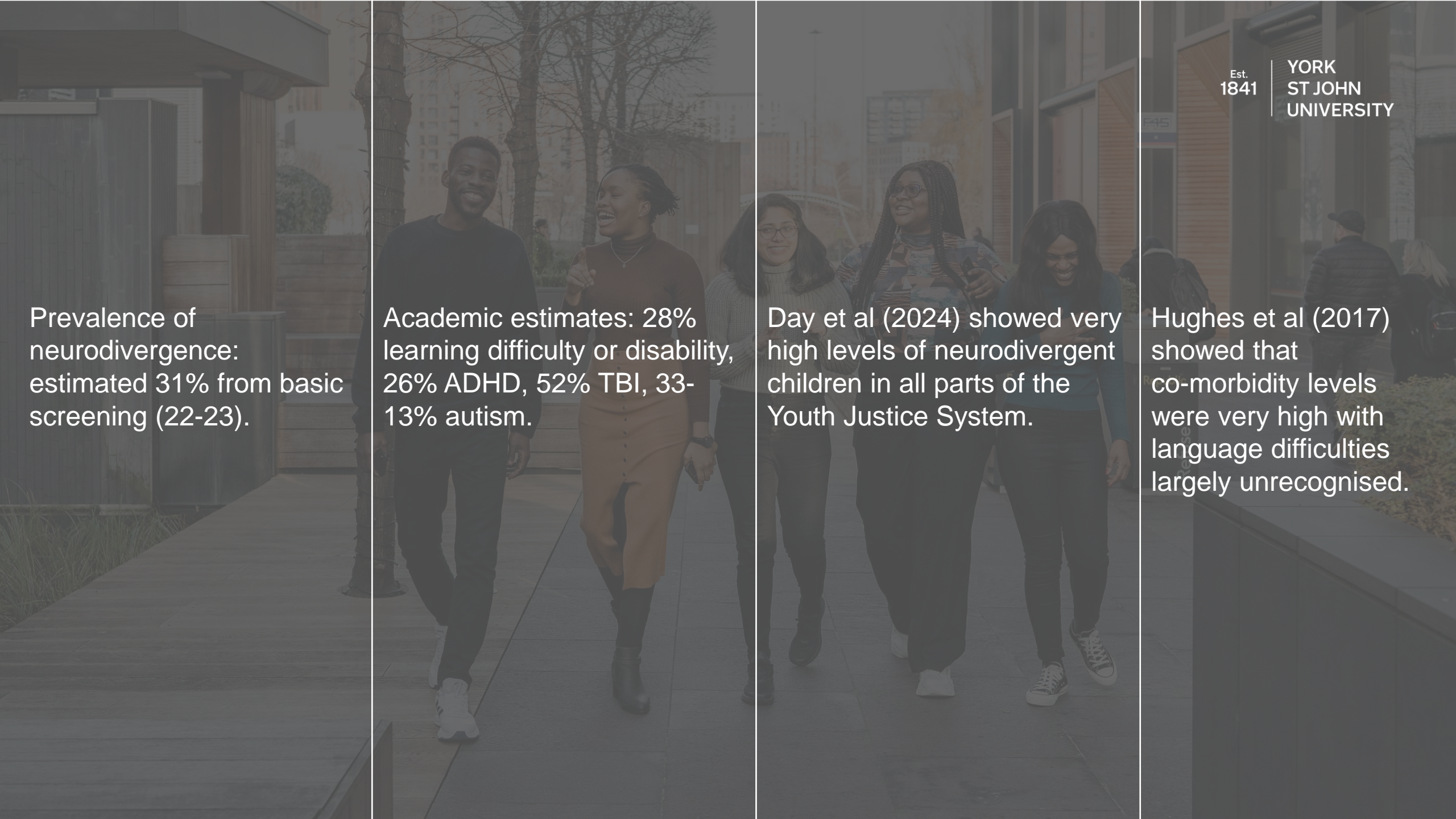


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Neurodivergence (Bromley Briefing 2024)





Prevalence of neurodivergence: estimated 31% from basic screening (22-23).

Academic estimates: 28% learning difficulty or disability, 26% ADHD, 52% TBI, 33-13% autism.

Day et al (2024) showed very high levels of neurodivergent children in all parts of the Youth Justice System.

Hughes et al (2017) showed that co-morbidity levels were very high with language difficulties largely unrecognised.

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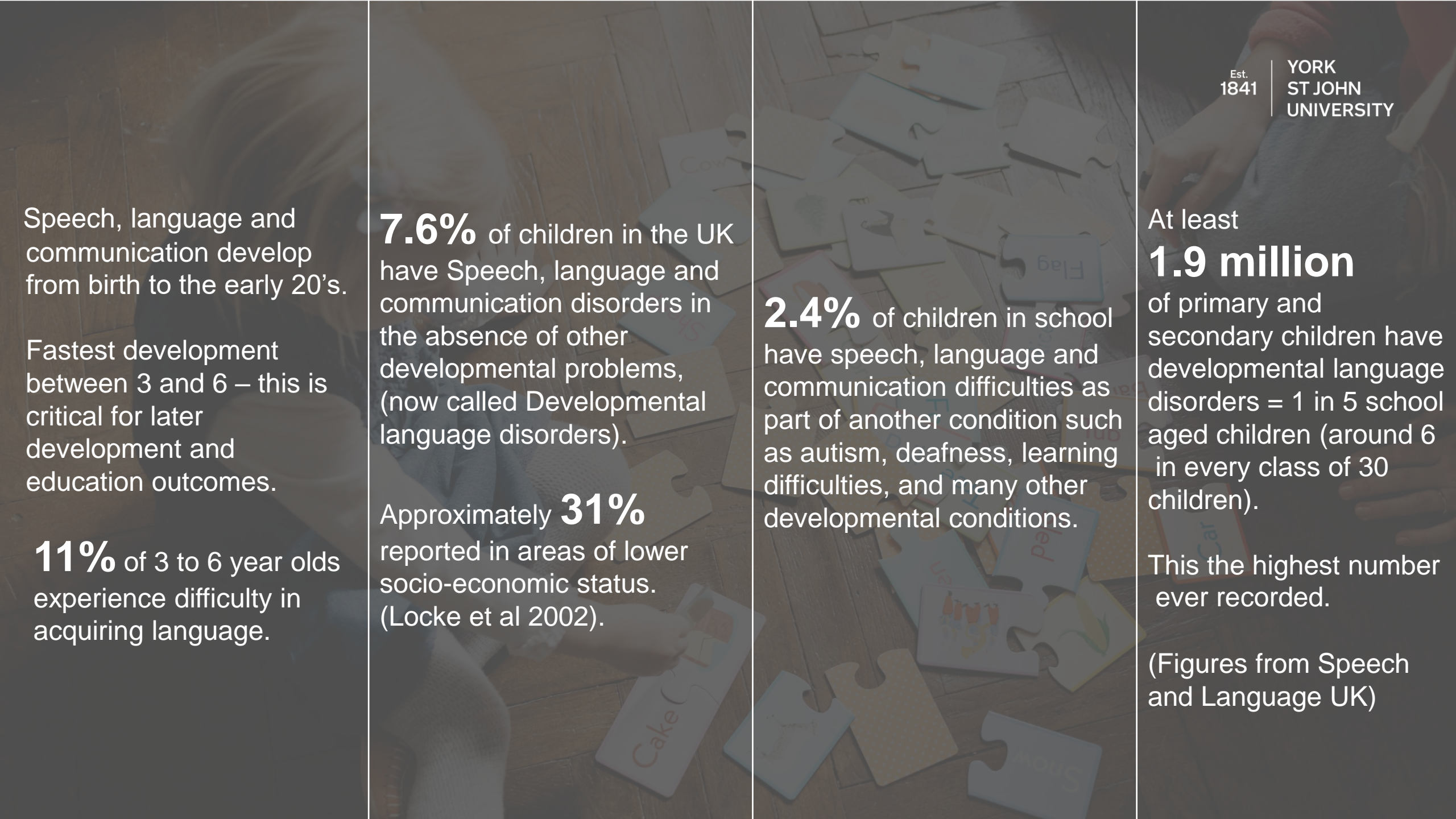
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Language development





Speech, language and communication develop from birth to the early 20's.

Fastest development between 3 and 6 – this is critical for later development and education outcomes.

11% of 3 to 6 year olds experience difficulty in acquiring language.

7.6% of children in the UK have Speech, language and communication disorders in the absence of other developmental problems, (now called Developmental language disorders).

Approximately **31%** reported in areas of lower socio-economic status. (Locke et al 2002).

2.4% of children in school have speech, language and communication difficulties as part of another condition such as autism, deafness, learning difficulties, and many other developmental conditions.

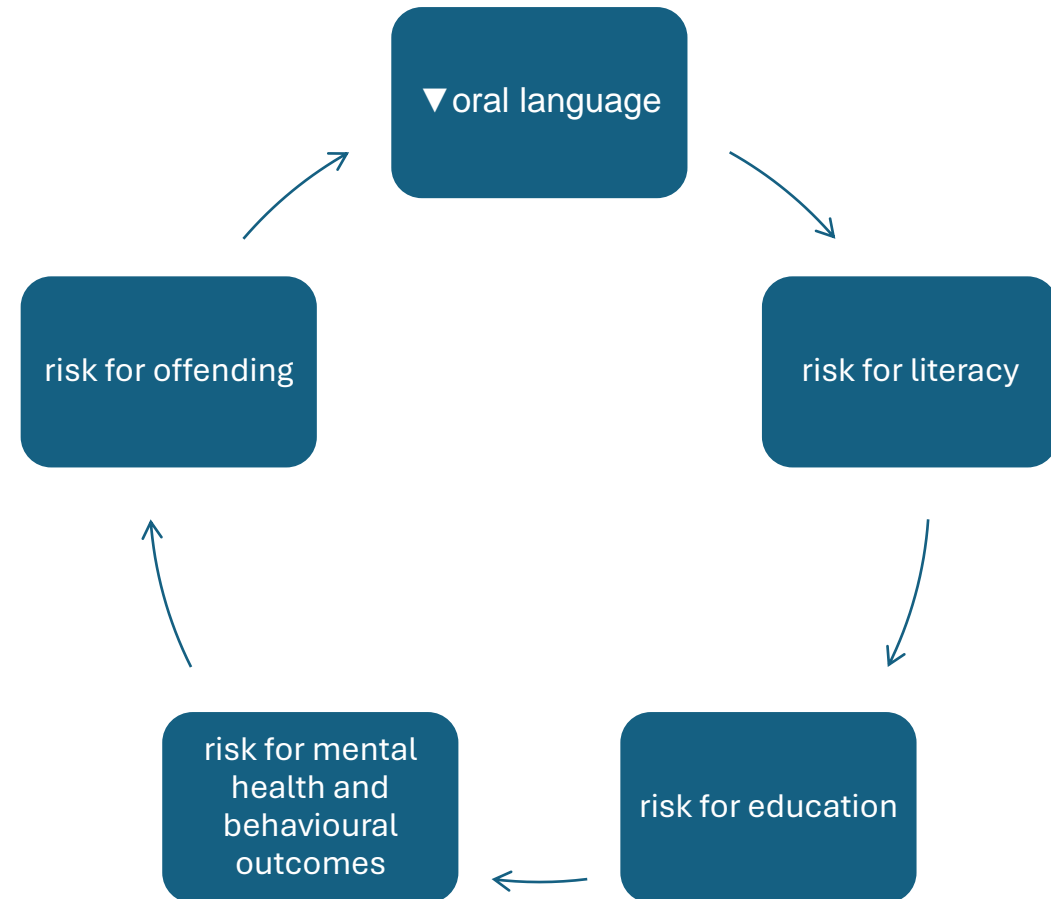
At least
1.9 million of primary and secondary children have developmental language disorders = 1 in 5 school aged children (around 6 in every class of 30 children).

This the highest number ever recorded.

(Figures from Speech and Language UK)

Communication difficulty and education

- Children who enter school with language difficulties are at risk for literacy difficulties (Snow 2009), behavioural problems (Lindsay et al 2007) and psychological problems (Beitchman et al 2001)
- Comprehension difficulties make children very vulnerable in relation to education (Hooper et al 2003)
- Compounding risk model: speech and language difficulties, literacy difficulties, low levels of educational achievement, are risk factors for mental health problems and offending (Bryan et al 2015, Jagoe and Walsh 2020).



Speech Language and Communication Difficulty (SLCD) as a risk factor for offending

Brownlie et al's (2004) and Smart et al's (2003) longitudinal studies show language impairment is a significant risk factor for offending.

Winstanley et al (2018) suggest that early SLT intervention decreases that risk.

Clegg et al's (2005) longitudinal study shows that one third will develop mental health problems if untreated, with criminal involvement in over half of cases.

Evidence from a long term Danish study (Mouridsen and Hauschild 2009) indicates that boys with severe expressive language problems were significantly more likely to be convicted of sexual offences.

Hughes et al. (2017) showed that comorbidities with SLCN are common in young offenders, suggesting that detailed neurodevelopmental assessments are needed.

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Adolescent language development



Language development continues into adolescence and involves the refinement of skills acquired in early childhood (Nippold 2007)

Language develops in four key areas:

1. Semantic (meaning) knowledge via direct teaching, contextual abstraction, and vocabulary development
2. Syntactic (grammar) skills: sentence length and increased inter- sentence cohesion
3. Narratives: increasing coherence
4. Pragmatic skills (using language) e.g., increased understanding of sarcasm and ambiguity (Law et al 2015).

Adolescent language and social development

Refinement of verbal (and written) skills is essential to life outcomes such as academic achievement, employment and financial independence.

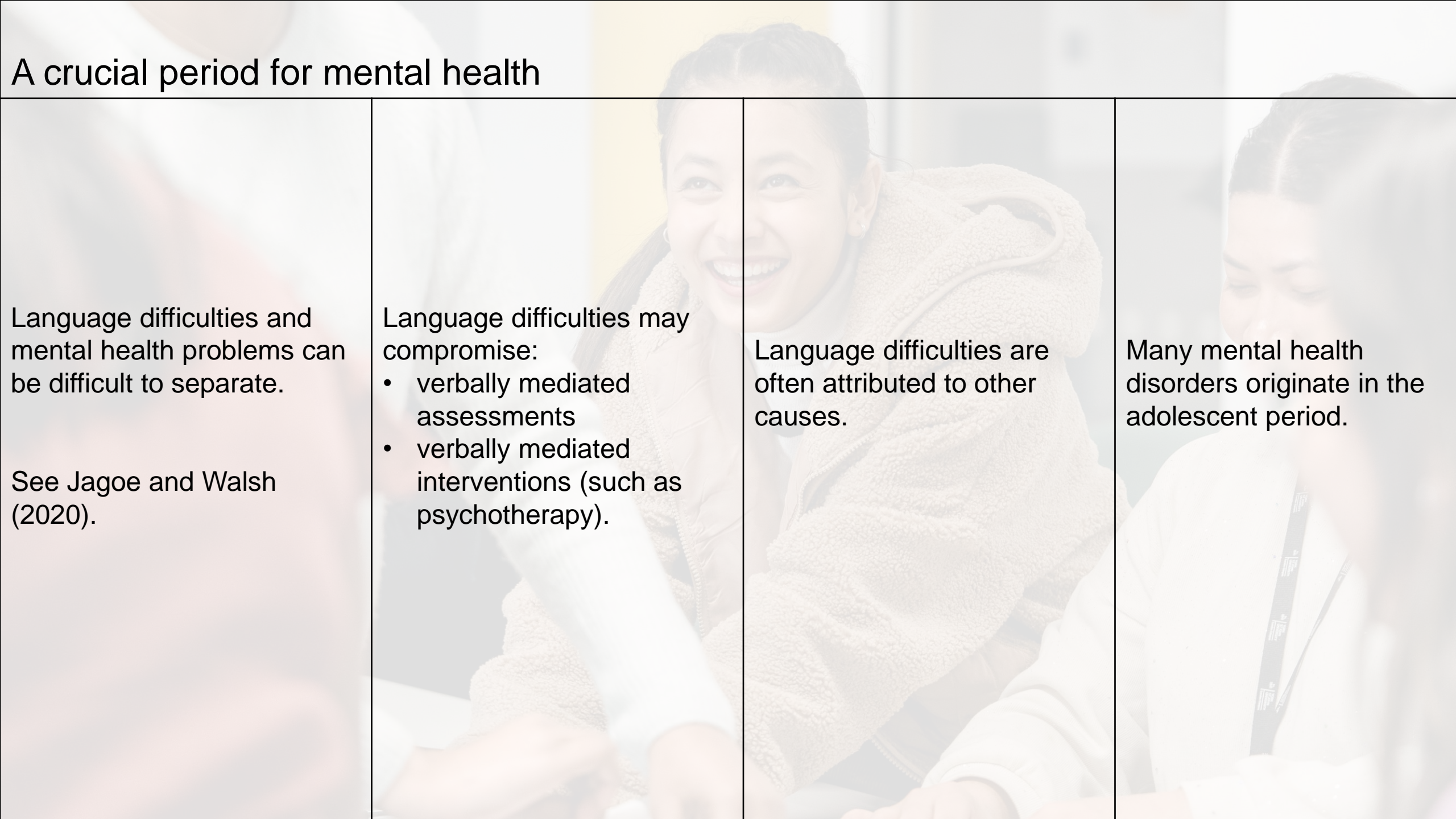
Also linked to a shift from family centred to peer centred priorities.

The language development is gradual and subtle and reflects the shifting demands of schooling and social life.

Whitmire (2000) suggests that adolescents with SLCN are vulnerable to problems with peer and family relationships and with coping with the demands of school.

Evidence of significant changes in the brain structure and function to achieve this (Blakemore 2019).

A crucial period for mental health



Language difficulties and mental health problems can be difficult to separate.

See Jagoe and Walsh (2020).

Language difficulties may compromise:

- verbally mediated assessments
- verbally mediated interventions (such as psychotherapy).

Language difficulties are often attributed to other causes.

Many mental health disorders originate in the adolescent period.

A close-up photograph of two hands, one of which is wearing a black plastic handcuff. The hands are clasped together, with fingers interlaced. The lighting is dramatic, with strong blue and purple hues, creating a somber and intense atmosphere. The background is a soft, out-of-focus grey.

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Language skills in young people who offend

Studies

UK YOI studies (Bryan et al 2007; consistently show that at least 60% have SLCD (2 SD below the mean).

International Studies

- Snow and Powell (2008) demonstrated Australian adolescents on community orders have difficulties understanding narratives and conveying information (approx. two years below peers)
- Sanger et al's work in the USA (2001) with female adolescent offenders gave a similar picture
- Cohen's group in Canada (1998) showed 50% of adolescents receiving services for behavioural disturbances had language impairments when specifically tested.

In 2021 Winstanley et al examined re-offending rates and demonstrated that 60% of a sample of 145 young offenders had developmental language disorders (DLD).

- None had previously been diagnosed or received SLT intervention.
- Of the young people with DLD, 62% reoffended compared to 25% of young people without DLD.
- The study also showed that DLD was a much stronger predictor of reoffending than other factors. This study again illustrates the need for systematic assessment of SLCN in young people who come into contact with criminal justice services.

Effects of SLCD: Example of a young offender 'B'



- Aged 16 years and 11 months
- Has a disrupted background involving periods in care
- Has attended a number of boarding schools (special schools but unclear what type)
- Ceased to attend school regularly from age 14 and passed no exams
- Engaged in education but is finding English “really hard”. He attributed this to reading difficulties which he has always had. He is frequently sent back from education for being ‘silly’.
- Often on ‘bronze’ level.

Effects of SLCD: Example of a young offender 'B'



Assessment showed

- Verbal ability: fast bursts of speech and poor articulation with some of his utterances difficult to understand
- Spoken vocabulary (word associations from the CELF 4 standardised assessment): meets the criteria for his age
- Formulated sentences (from the CELF 4 standardised assessment): he scores at an 8 year equivalent level indicating that he has difficulty in using language to convey meaning
- Understanding spoken paragraphs: he scores 5/15
- Verbal deduction: he failed the task indicating that he has difficult extracting information from verbal information.

Effects of SLCD: Example of a young offender 'B'



Self assessment

He is aware of his SLCD (Snow and Woodward 2017).

He reports:

- getting stuck on words
- not always being able to tell people what he needs or wants
- other people saying much more than him in a conversation
- finding it difficult to talk to staff
- finding it difficult to think of what he wants to say
- having difficulty following routines.

Despite this, if asked whether he has communication difficulties, he says no!

Effects of SLCD: Example of a young offender 'B'



Effect of SLCD

- Already struggled at school
- Induction process- answering questions and completing forms?
- Opting out and trying to be invisible are his strategies
- Voluntarily talks to “no one”
- What does he do when communication breaks down - “nothing” “forget it” (so problems compound)
- If someone argues with him or questions him it often ends up in a fight or exclusion
- Attended a Review Board and understood “one or two bits”
- Wanted a garden job but was refused as too high risk- he did not know a) what this meant or b) why
- Essentially not addressing any of his issues.

Effects of SLCD: Example of a young offender 'B'



Lost opportunities for identification and remediation of language difficulties.

'B' has:

- been to school, at least one special school
- reports long standing literacy difficulties
- has been in the care system
- has been Not in Education, Employment or Training (NEET) since around age 14
- has had contact with youth justice services in the community.

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Intensive surveillance and supervision Programme (ISSP)



Overview

- Speech and language therapist 3.5 days per week in Youth Offending Team (YOT)
- Identify language and communication difficulties in the young people on ISSP
- Plan and co-ordinate intervention to address their identified needs
- Evaluate any change in language and communication skills post intervention.

Gregory and Bryan (2011) ISSP study

Screen:

- Brief self-assessment (also by Key worker [KW])
- CELF 4 Communication Observation Schedule (also by KW)
- Verbal reasoning deduction task (Canterbury and Thanet verbal reasoning)
- Broadmoor observation of communication (by KW)

58/72 identified by the screen - continuous sample over 12 months (3 not seen).

Aged 11-18 years, most excluded from school or alternative programmes within schools for Behavioural Emotional and Social Difficulties with statement for challenging behaviour (none had statements for Learning Difficulties or language difficulties).

Assessment

CELF 4 subtests:

- Understanding spoken paragraphs
- Word associations
- Formulated sentences

65% had profiles indicating that they might benefit from SLT intervention.

Comprehension delays more likely to be overlooked.

Interventions

Mainly embedded within individual programmes jointly with YOT staff.

Listening and Understanding

- Using language at appropriate level, listening / attention, memory skills, vocabulary, using strategies to aid understanding

Expressive Language

- Fluency, narrative, speech clarity, vocabulary, giving instructions

Social Skills

- Awareness of good communication, verbal and non verbal skills, assertive behaviour, interview and court preparation.

Re-assessment

20/49 who received SLT intervention were re-assessed on leaving ISSP (2 weeks before leaving or early release)

So didn't re-assess those who breached, entered custody (re-offended) or moved away- so may be a positive bias in the sample?

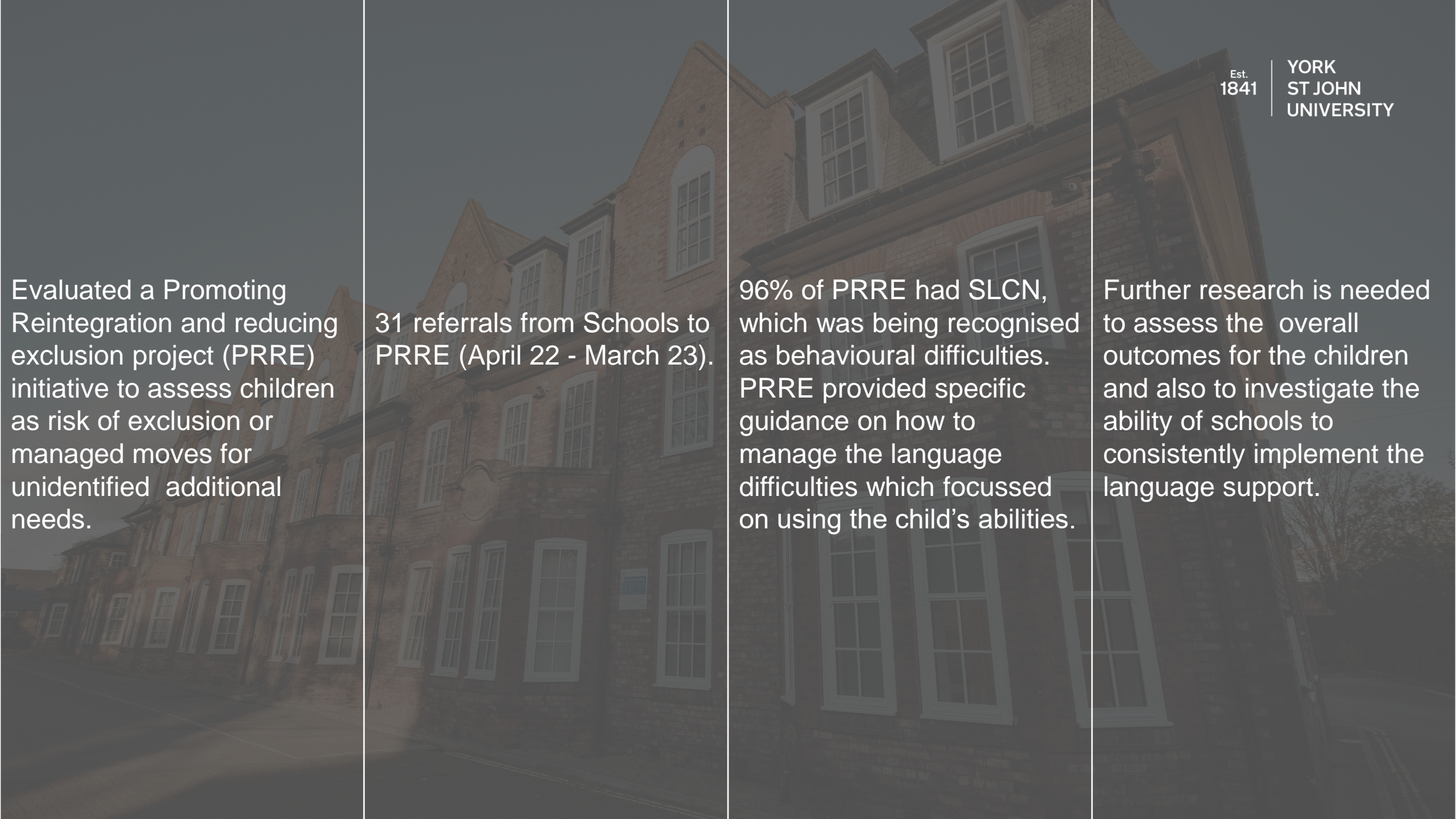
Results

- 75% showed improvement on language assessment (but no control group)
- SLT was positively viewed by the ISSP staff in terms of enabling young people with SLCN to access and understand offender treatment programs (Bryan and Gregory 2013)
- Test: re-test improvement may reflect total contribution of ISSP programme
- A phase one clinical trial of 1:1 SLT intervention, delivered in a custodial setting, showed that intervention was effective, and the young people engaged well. The trial also illustrated complexities in service delivery and sudden changes to routine that make such research pragmatically complex to deliver (Snow and Woodward 2017).
- Need further studies on SLT intervention itself.

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Milton Keynes YOT data analysis (2024)



Evaluated a Promoting Reintegration and reducing exclusion project (PRRE) initiative to assess children as risk of exclusion or managed moves for unidentified additional needs.

31 referrals from Schools to PRRE (April 22 - March 23).

96% of PRRE had SLCN, which was being recognised as behavioural difficulties. PRRE provided specific guidance on how to manage the language difficulties which focussed on using the child's abilities.

Further research is needed to assess the overall outcomes for the children and also to investigate the ability of schools to consistently implement the language support.

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Implications for services involving Children and young people (Bryan et al 2015)



- Speech, language and communication problems are common problems and are risk factors for educational difficulty, criminal activity and mental health.
- Increasingly recognise the importance of adolescent language and social development, and the vulnerability for a young person's mental health if this is disrupted.
- Need greater awareness that SLCN are often enduring problems.
- **A young person with SLCN is less likely to benefit from interventions that are verbally mediated.**
- Over-representation of SLCN and MH problems in young people in EBD schools, youth justice settings, MH settings and services for school exclusion.
- Need to routinely screen young people with 'behaviour' problems, engagement or school problems and MH issues for communication difficulties.
- Need to assume there are SLCD rather than wait for recognition!

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Coffee Break

10:45-11:15



Bridging the Gap

Dr Stacy John-Legere, *Neurodevelopmental Paediatrician*
Louisa Righelato, *Speech and Language Therapist*



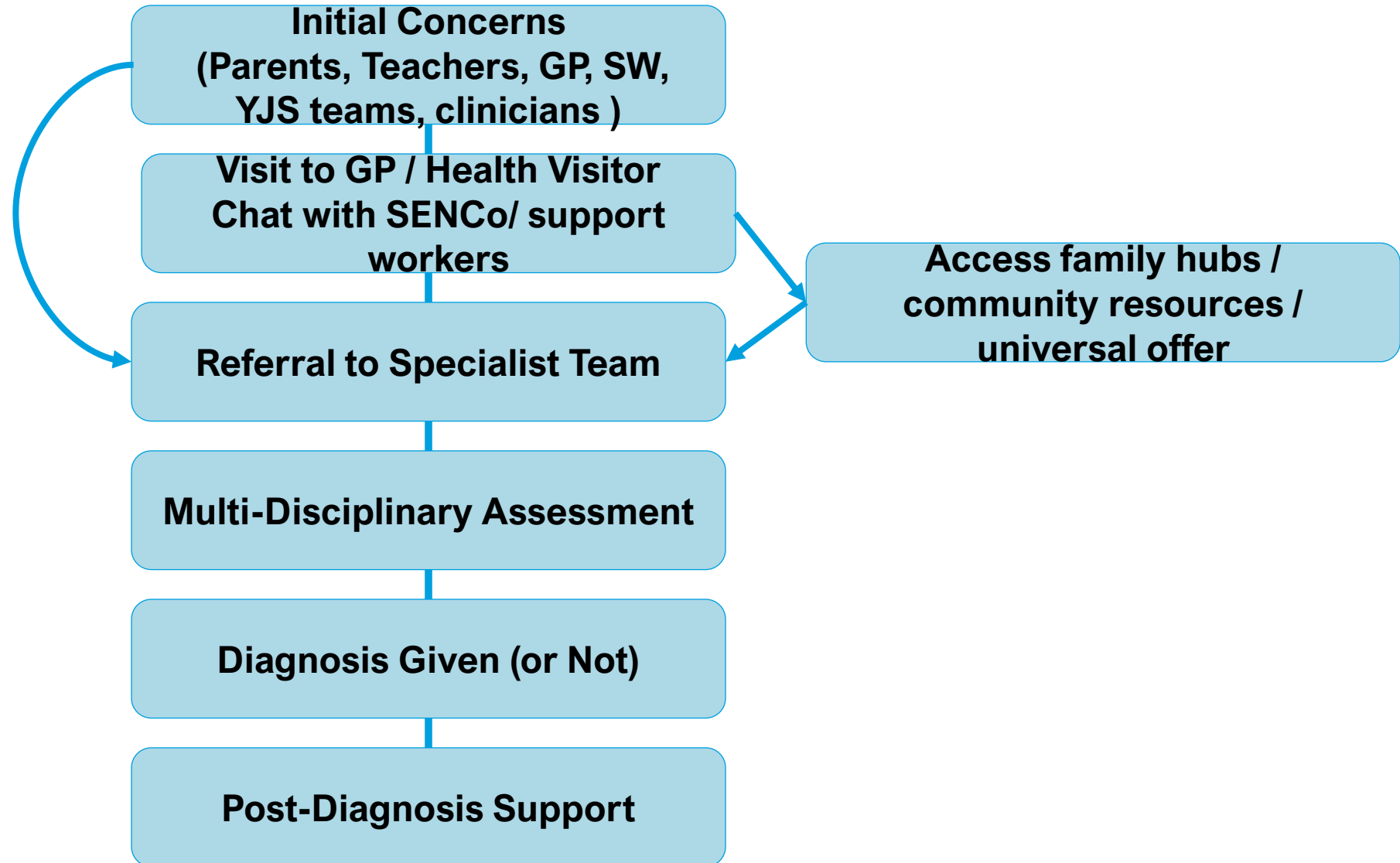
A neurodevelopmental disorder is....

DSM-5:

neurodevelopmental disorders are a group of conditions with **onset in the developmental period** including

- intellectual disability,
- communication disorders,
- autism spectrum disorder,
- attention-deficit/hyperactivity disorder,
- specific learning disorder,
- motor disorders.

Typical assessment pathway



Georgia's story

First referred at 8 years old

Moved to London 3 years before referral

Bilingual – referred when bilingual teacher realised same issues in French
– needs steps broken down in lessons

Receiving guided groups and interventions

No mention of SLT input in referral or provided school information

Referral concerns:

- Specific interests, distracted, highly imaginative – blurs understanding of reality, struggling to access learning,
- kind and caring, plays well with other children, shares things

Georgia's story

Paediatrician assessment – approx. 1 year later

Differential diagnosis : ?ASD ; language needs

School to consider SLT assessment

Autism and Related disorders assessment clinic – year after initial assessment; in person interpreter

Parental report – not referred to SLT

- (retrospective review ; accessing SLT in hub at school)

Assessment inconclusive for ASD : ADI, ADOS-2 & School information

School observation and EP consultation recommended

Language assessment

Carried out to inform ARD assessment conclusion :

Assessment of comprehension and expression :6-11 (ACE)

Result – well below expected average

Diagnostic outcome : Developmental Language Disorder

Impact :

- Better parental understanding
- Access to differentiated teaching and SLT hub
- Application made for EHCP-NA
- Worries about transition to secondary school - vulnerability in peer relationships ; preserving positive feelings toward school



Youth Justice Service Case Study-Daniel

Early Years and Primary School

- Complex family history
- No developmental concerns noted
- Year 6-COVID pandemic started

Secondary School

- Secondary school -> Pupil Referral Unit->Secondary School
- Education Health Care Plan completed
- ADHD Diagnosis in Year 7

Youth Justice Service

- Referral to YJS and first contact with Speech and Language Therapy services
- Referral for ASD assessment

SEMH School

- Language assessment started. 13 contacts attempted: one successful
- Daniel identified some skills as difficult:
 - Paying attention for a long time
 - Knowing when he needs to be somewhere
 - Recounts and story telling 'I don't know how to explain that stuff.'
 - Getting people to understand him
 - Understanding what other people are thinking

Youth Justice Service

- Tier 4 ASD assessment negative: Oppositional Defiant Disorder diagnosis
- Language needs assessed and fed back
- Referral to audiology
- Therapy offered
- Indirect support:
 - Communication passport completed for court
 - Update sent for EHCP
 - Liaison with other professionals

Communication Passport



SPECIFIC AREAS IN NEED OF SUPPORT

Important things to know about me:

- I may move and fidget more than others due to my ADHD. I may interrupt you as you talk.
- I have a Language Disorder. This means I have difficulties understanding and using language.
- I often mishear words and misunderstand what has been said.
- I don't always recognise when I have misunderstood information.
- I struggle with my memory, which means I can find it difficult to process, understand, and answer questions about spoken information
- I find it hard to follow complex instructions
- I don't always understand the vocabulary you might expect me to
- I find it difficult to retell events clearly
- I can speak quickly and be hard to understand
- I find it difficult to regulate my emotions and judge when my emotions are starting to feel out of control



WHAT PROFESSIONALS CAN DO, to support Daniel in Court

To SUPPORT ATTENTION =>

- Let me know what is happening and how long it is expected to take.
- Offer me short breaks if you can.

To SUPPORT UNDERSTANDING =>

- Speak in short sentences
- Repeat instructions and important information
- Use visuals to support spoken information (written reminders, timetables, etc)
- Break instructions down into parts and say things in the order you would like them done
- Check my understanding regularly. **Ask** me to recap in my own words what you have said. **Do NOT ask:** 'did you understand?' as I may say 'yes' to comply
- Help me understand others' perspectives and actions using tools like Comic strip conversations and flowcharts

To SUPPORT EXPRESSION =>

- Encourage me to take my time when talking
- When retelling events it might help me if you ask questions for key details, like 'what happened first? what happened next? How did they feel?'
- Don't assume I am lying if my stories/retelling of events aren't clear
- Use visual tools like the 5 point scale to help me express how I feel

Projects & interventions

Early Years Services	<ul style="list-style-type: none">• 2 day training for nursery staff• Wellcomm Screen training for Health Visiting team, nursery and children's centres staff
Primary Schools	<ul style="list-style-type: none">• Wellcomm Screening• Talk Matters – Lambeth Violence Reduction Unit (VRU)• SENDCo Forums

Trauma informed SLT Dept

Secondary School	<ul style="list-style-type: none"> • SAFE (SUCCEED – ATTEND – FULFIL – EXCEL) project • SEMH training • Taskforce • SENDCo Forums
Youth Justice Services	<ul style="list-style-type: none"> • Turnaround project • Background checks • Screening • Liaison with SLTs in education settings • Supporting access to YJ processes and interventions • Communication profiles • ASD and ADHD assessment pathways
Other	<ul style="list-style-type: none"> • Training social care staff • CLA nurses training

Trauma informed SLT Dept

Turnaround project case study-Kameron

Early Years

- Known to Early Years SLT service

Primary School

- Assessment and support for language skills
- Presenting with Language and Behaviour needs

Secondary School

- Behaviour leads to Taskforce referral in Year 9

Taskforce: Assessment

Needs in:

- Grammar and syntax
- Narrative skills
- Word finding difficulties
- Time to process and respond to information

Taskforce: Therapy

Aims for Kameron to:

- Understand his language profile
- Use strategies to ask for help or clarification
- Identify strategies he will use if he is getting upset in school and how to manage situations respectfully with teaching staff.
- Identify strategies staff working with him in 1:1 sessions can use

Return to secondary School

- Report shared with Kameron, his mother, the PRU and school staff
- Transition meeting
- School observation

It is good to know why I get stuck when I am trying to speak. I am happy that teachers are trying to help me more in the classroom

Thank you so much for the support, Kameron is more positive about school and teachers are doing more to support his learning in the classroom

Kameron appears much more positive being in school and the goals he has set himself are appropriate. We are going to use the strategies outlined in the report to support him

Concluding thoughts : Health and Language

Best Start in Speech, Language & Communication (2020)

- recognition, advice, support, engagement and collaboration

Learning from what works

Impact on

- Mental health and emotional wellbeing
 - Access to talking therapies
- Family and parental relationships
- Sense of self; self-esteem; self advocacy

Support for **identified need** ; not wait for diagnosis

Acknowledgements

EU COST Action *Justice to Youth Language Needs: human rights undermined by an invisible disadvantage Y-JustLang*

The British Academy

Evelina Children's Community Services

Guys and St Thomas NHS Foundation Trust

Lambeth and Southwark YJS Teams

&

The children, young people and families we work with



End of the Pipeline; Adding value in an imperfect system

Gemma Arnold (Neurodiversity Lead)

Amy Sherman (Speech and Language Therapist)

Adult Prison Estate





Introduction



- Up to 80% of adult prisoners had speech, language and communication needs (McNamara, 2012)
- Over 60% of young people who offend will have speech, language and communication needs (Bryan et al, 2015)
- Around half of people entering prison may have a form of neurodivergence, which impacts their ability to engage positively in the prison regime (Criminal Justice Joint Inspection, 2021)





Case Studies

Effective Transitions

Benefits of late identification



June
2015

- SLC Needs identified at YJS age 15. Query LD (recommendation for assessment)
- Not in education
- Significant ACEs

Jan 2017

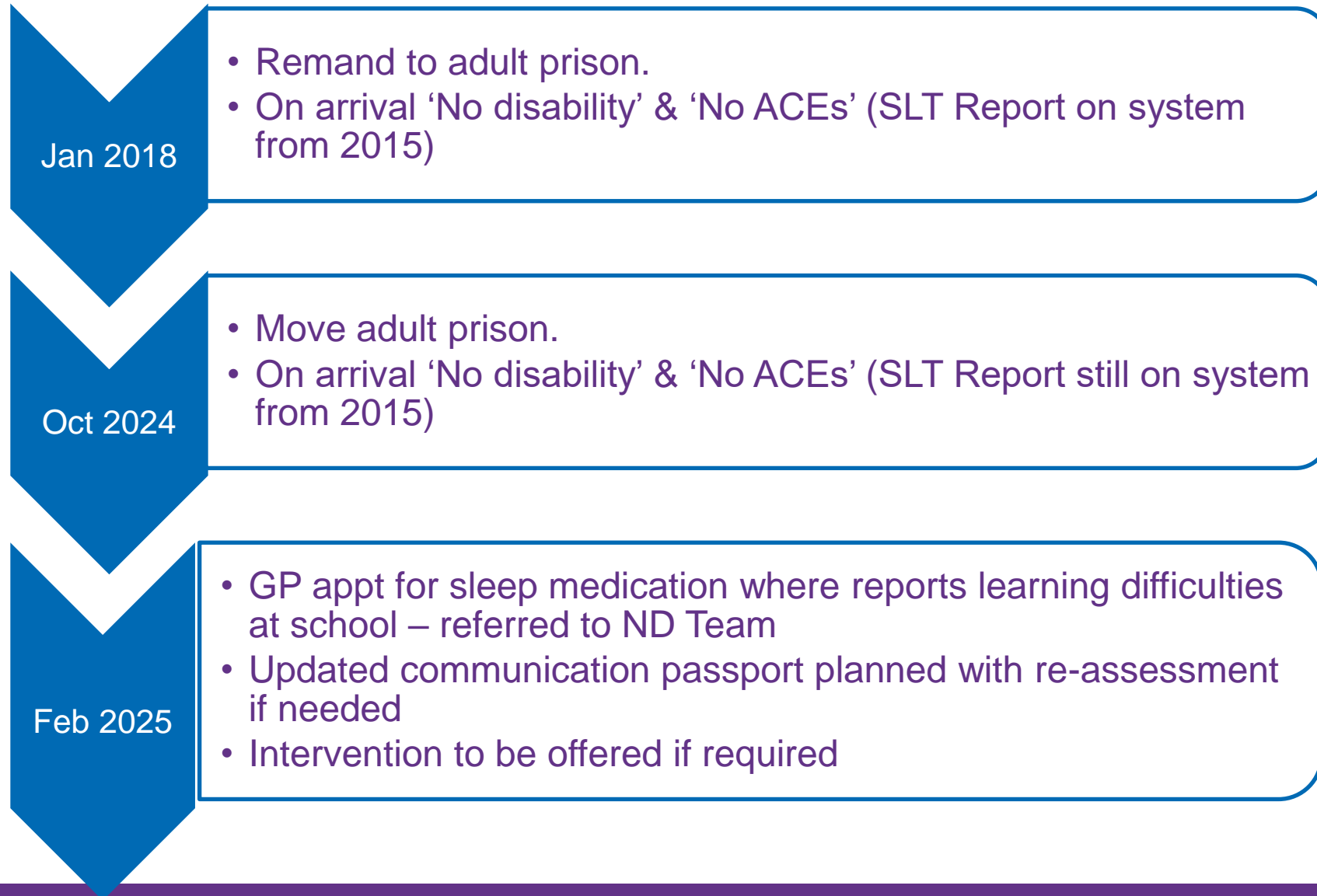
- Remanded in YOI.
- On arrival assessed as 'No disability'

May
2017

- Needs recognised and previous report requested
- Signposted for LD assessment

June
2017

- Some SLT Support but no LD Ax
- Barriers to both include regime inflexibility



What helped



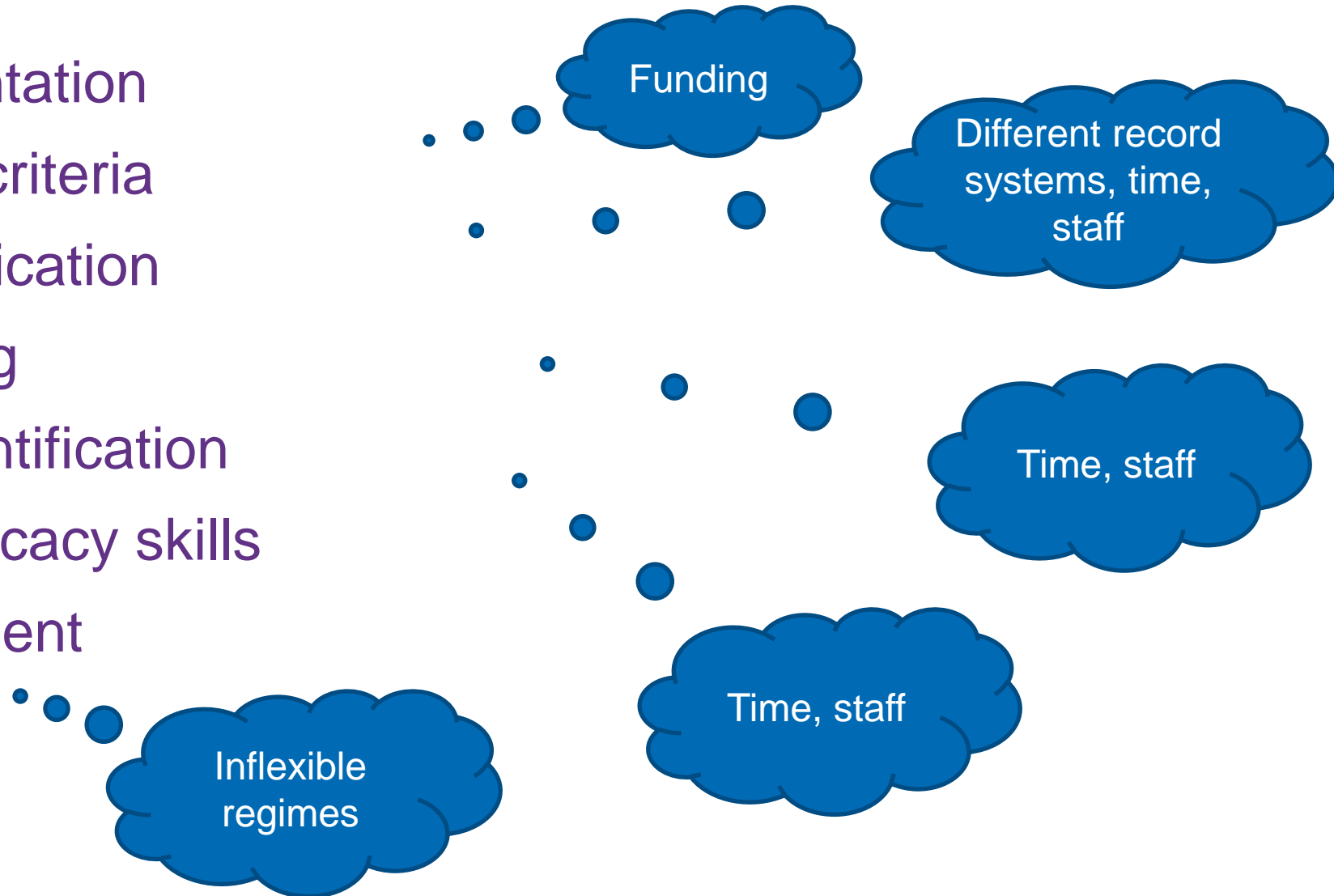
- Staff knowledge
- Availability at of SLT / ND support (YJS, YOI, and adult estate)
- Links between establishments



Learning



- Documentation
- Referral criteria
- Communication
- Screening
- Early identification
- Self advocacy skills
- Environment





2020

- Moved to UK from The Gambia aged 14 and started in London school. Bilingual English and Wolof. Spoke English at school and home.

June
2022

- Mum takes to GP with concerns about his behaviour at school and getting into the 'wrong crowd' and police involvement who suggested autism assessment.

July
2022

- GP writes to school relaying mums concerns and asking for their opinion for referrals
- SENCO writes back to GP explaining year 11s are now on holidays and he was excluded prior to exams for an 'incident at school'.
- Reports poor behaviour, doesn't respond well to instructions and can be aggressive when challenged, poor social skills. Also says there is a 'language barrier' . Unable to access mainstream GCSEs.



July 2022

- GP refers to CAMHS for assessment. Also refers to social services.
- CAMHS reply saying they are the wrong team and ask to refer to community paediatric team.
- Community paediatrician replies saying they must contact school with concerns, school must then complete suggested interventions before making referral. (not possible as excluded)
 - Mum then unable to find a new school to accept him.

May 2024

- May 2024 Arrested, charged and remanded in local prison age 18.

Oct 2024

- GP appointment – GP found conversation ‘difficult’ and queried learning needs. Referred to ND team.
- Triaged by SLT and added to communication w/l



SLT assessment (Jan 2025);

- Poor receptive/expressive vocab.
- Difficulties with narrative
- TROG2 – standard score 67 1st percentile
- Severe difficulty following 2/3 step instructions
- Severe difficulty in auditory memory
- Observed difficulty maintaining attention
- Social communication differences
- Possible visual processing difficulties
- Officers report he ‘doesn’t listen’
- On CSIP and basic for behaviour and fighting

After Assessment;

- Communication plan created and shared
- Handover to education support worker
- SLT offer involvement in CSIP meetings
- Referral to Psychiatrist for ADHD assessment
- Vocab and narrative goals set
- Encouraged to ask lawyers for intermediary for future court appearances, however trial already finished before SLT assessment.

What helped



- Advocates
- Staff knowledge
- ND Team





- Referral criteria
- NEET services
- Cultural awareness
- Screening
- Waiting lists

Funding

Knowledge

Time, staff

Is it too little too late?



- Improved prison experience
- ADHD diagnosis
- Self advocacy skills
- Future awareness
- Professional learning for change



- Impact
- Community support
- Intermediaries
- Diversion
- Training
- Health and Health Literacy

A reality check for early intervention

What happens when speech, language, and communication needs are unmet in childhood?

Carol-Ann Murray

Associate Director

*Learning Disability, Autism and SEND Programme
NHS South East London*



Gerry Baker

Programme Lead - Clinical Manager

*Learning Disability and Autism Programme
NHS South East London*



Our Insights

Adults who have experienced harm due to unmet need and systemic failure

Lifelong impact of these unmet needs

Case Study One

Young black man

Mild-Moderate Learning Disability and Autistic

Looked after since age 16

Mostly non-verbal

Limited language ability and communication skills

Admitted to hospital from prison

Our questions

How did the police arrest go?

How did he experience it?

How was he perceived?

Did anyone advocate for him?

Did he have a voice especially as he was non- verbal?

How does our criminal justice system send this mainly non-verbal young man to prison?

Impact and Outcomes

Trauma of arrest and imprisonment

Trauma of prolonged hospital admission

Improved community support

Case Study Two



History

12-years old

Emigrated from West Africa

Human rights abuses and civil war

Trauma

Civil war

Bereavement

Alleged physical abuse from relatives

Experience at school

They tried to end their life

Assault and threat of assault

Police involvement

Wandering late at night

Admission to Mental Health unit

Diagnoses

Learning disability

Struggles with relating to others

Communication needs

Psychotic disorder

?ADHD

Function of behaviours

Care seeking

Sensory overload

Unmet needs

Care Education and Treatment Review

Tolu's thoughts

Trusted adults

Sleeping well

Medication helps

Feeling good

Too many locked doors

My future

Panel concerns

Personal and family history

Religious and cultural needs/preferences

Extended stay in hospital

Visa issues

EHCP

What happened?

What happens when SLCN are unmet in childhood?

- Poor quality of life
- Mental and physical illness
- Criminal justice system involvement
- Reduced societal contribution in adulthood
- Impact on individuals' Human Rights

What does the evidence say?

- Systemic Failures in Diagnosis and Service Provision
- The Critical Link between SLCN and Mental Health
- The Lifelong Consequences of Unaddressed SLCN
- Vulnerability of People with SLCN in Police Custody and Legal Settings
- Long-Term Social and Economic Burdens of Unaddressed SLCN

Systemic Failures in Diagnosis and Service Provision

- Organisational barriers
- Inaccessible talking therapies
- Limited access leading to health inequalities
- Child and Adolescent Mental Health Services (CAMHS) criteria

The Critical Link between SLCN and Mental Health

- Unmet needs leading to significant mental health issues
- Poor language skills - misinterpreted as behavioural problems
- Access to mental health interventions

The Lifelong Consequences of Unaddressed SLCN

- Effects on education, employment, social relationships, and mental health stability
- Unemployment, lower income, and difficulties with independent living
- Higher risk of psychiatric disorders, substance abuse, and social withdrawal
- Higher likelihood of experiencing intimate partner violence or social isolation

Vulnerability of People with SLCN in Police Custody and Legal Settings

- High verbal demands, difficulty navigating legal proceedings
- Increased likelihood of wrongful convictions
- Lack of appropriate support

Long-Term Social and Economic Burdens of Unaddressed SLCN

- Economic impact on society
- Greater risk of financial instability, housing insecurity, poor health, and reliance on welfare support
- High risk of reoffending

Solutions

Any questions?





Lunch

12:45-1:45





Session 2: Language as the gateway to education fulfilment

13:45-17:00

Chair: Angeliek van Hout

This session will discuss the relation between language development, social inequalities and literacy and educational fulfilment across the school years.



Secondary School as a place to thrive as a young person with language needs

Language development, social inequalities and educational fulfilment

Dr Sarah Spencer

University of Sheffield

Sarah.spencer@sheffield.ac.uk

Mind the Gap: Language Development is Key for Inclusive
Education and Wellbeing



March 2025



Language as the gateway to educational fulfilment

The focus of my research is:

- Language development and support needs in older children and young people (Spencer 2017)
- Language and social inequalities (Spencer et al 2012; 2017a; Allen and Spencer 2022)
- Language and education (Spencer et al 2017b)
- Paediatric speech and language therapy (Spencer et al forthcoming)
- Language and social identities (Moore and Spencer 2021)

Today's session will consider:

- What challenges do young people with language support needs face in terms of educational fulfilment?
- What are the knowledge and practice gaps in relation to young people and educational fulfilment in contexts of social inequality?
- How can we work across education, linguistics, psychology and speech and language therapy to produce new responses to these challenges?

What do we need to know?

What do we need to do?

Thriving in Secondary School

Thriving is dependent on:

- Detailed and bespoke assessments
- Widespread awareness and understanding
- Communication Supporting Classrooms
- Tailored support to increase communicative participation
- Access to interventions as needed
- Preparation for transitions
- Neurodiversity-affirming practice
- Links between language work and identity work
- Being heard and respected

Today's session is an opportunity:

- For trans-disciplinary conversations
- Examining real world, complex problems
- New knowledge and solutions from collaborations across education, linguistics, psychology and speech and language therapy

Challenges: High risk

- Literacy (de Bree et al., 2010; Freed et al., 2015; Stothard et al 1998)
- Education (Dockrell, Lindsay and Palikara 2011; Dubois et al., 2020)
- Depression (Clegg et al 2005; Toseeb et al., 2023)
- Attention deficit disorder (Beitchman et al., 1996)
- Anxiety disorder (Conti-Ramsden and Botting, 2008; Voci et al., 2006)
- Aggressive behaviour (Brownlie et al., 2004)



Challenges: High risk

- Emotional difficulties (Valera-Pozo et al, 2020; Botting and Conti-Ramsden, 2000; St Clair et al., 2019).
- Behavioural, emotional and social difficulties (Lindsay, Dockrell and Strand, 2007).
- Friendships (Durkin and Botting, 2007, Conti-Ramsden et al., 2019).
- Peer relationships (Mok et al 2014; St Clair et al 2011; Forrest et al 2021) and social cognition (Forrest et al 2023).
- Quality of Life (Eadie et al., 2018)



Challenges: Underdiagnosis

Underdiagnosis in vulnerable groups

- Care leavers (Clegg et al 2021)
- Young people excluded from school (Spencer et al in preparation)
- Young offenders incarcerated and on community court orders (Chow et al 2022;)
- In marginalised communities (Spencer et al 2012)



Challenges: Underdiagnosis

- Service inequities
 - Firstly, children from vulnerable groups (e.g. low SES, ethnic minority groups) may be under-served by SLT services (perhaps due to limited resources being allocated to higher SES groups).
 - Secondly, children from these vulnerable groups may be overrepresented in receiving a diagnosis (perhaps due to biases in referral and assessment practices).
 - Social gradient to level of need and level of service engagement when compared to higher SES families (Hesketh et al., 2023).



THE INVERSE CARE LAW

JULIAN TUDOR HART

Glyncorrwg Health Centre, Port Talbot, Glamorgan, Wales

Summary The availability of good medical care tends to vary inversely with the need for it in the population served. This inverse care law operates more completely where medical care is most exposed to market forces, and less so where such exposure is reduced. The market distribution of medical care is a primitive and historically outdated social form, and any return to it would further exaggerate the maldistribution of medical resources.

- **Inverse Care Law** (Tutor-Hart 1971)
- Inverse Intervention Law (Webb et al 2020)

Interventions

Shape Coding™ (Ebbels et al 2024; overview: Ebbels and Spencer 2017)

Narrative Interventions (Joffe 2011; Joffe, Nixon and Hulme 2019)

Vocabulary Interventions (Spencer, Lowe, Clegg and Stackhouse 2017; Joffe 2011)

DLD and Me (Sowerbutts and Finer 2019)

Classroom based interventions (Lowe, Henry, Joffe 2019)

Communication for work (Mathrick et al 2017)

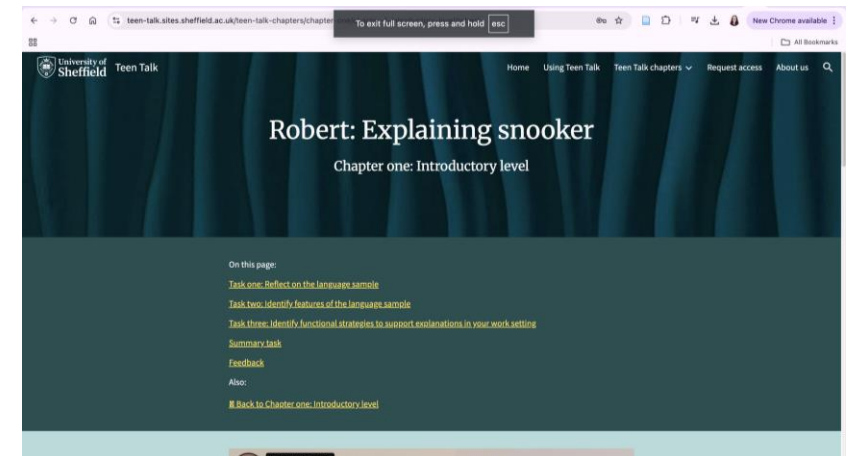
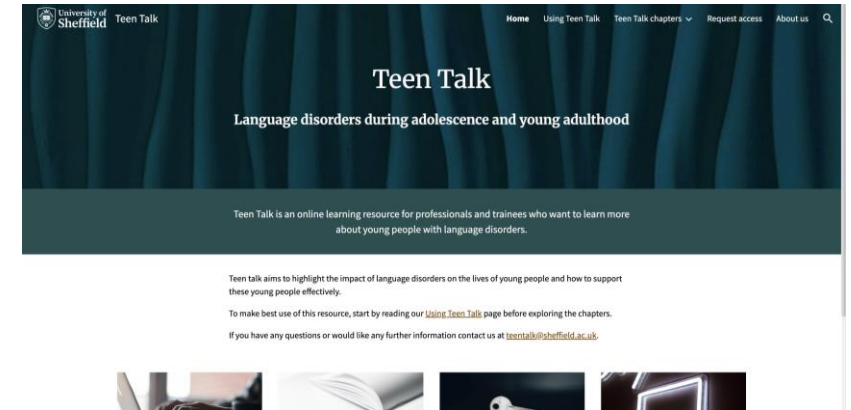
Discourse level interventions (e.g. Nippold and Marr 2022)

Talk for Work (Speech and Language UK, Spencer et al in preparation)

Life experiences

Video about experiences of school

Teen Talk is a free, online training package that supports users to understand SLCN by completing three chapters: Language Abilities (expository discourse tasks); Communication Difficulties (e.g. word finding difficulties); and Life Experiences (e.g. young people's own perspectives).

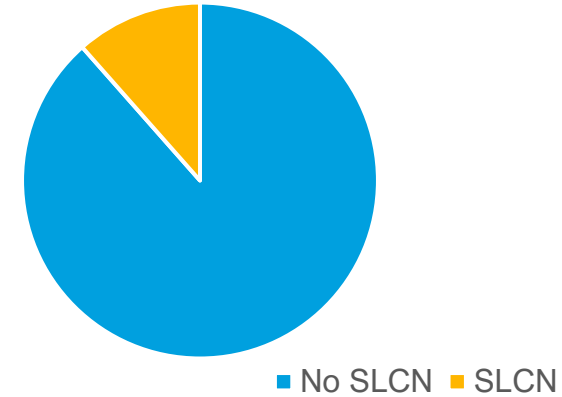


Reducing risk (current research)

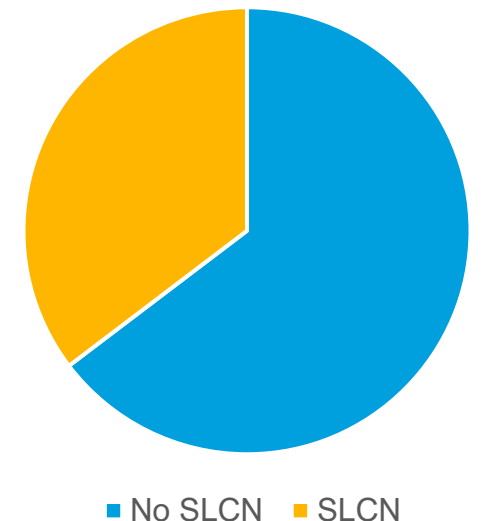
- Primary and Secondary Inclusion Panels
- Multidisciplinary meetings to prevent permanent school exclusion – now including SLT
- In this team, 530 primary school aged children had been discussed at panel, and 160 secondary school aged children.
- Of these, 54 primary and 51 secondary school pupils were thought to have SLCN at follow up.

Already aware that school exclusion is likely to be a risk factor for language disorder and responding with policy and support pathways.

Primary Inclusion Panel



Secondary Inclusion Panel



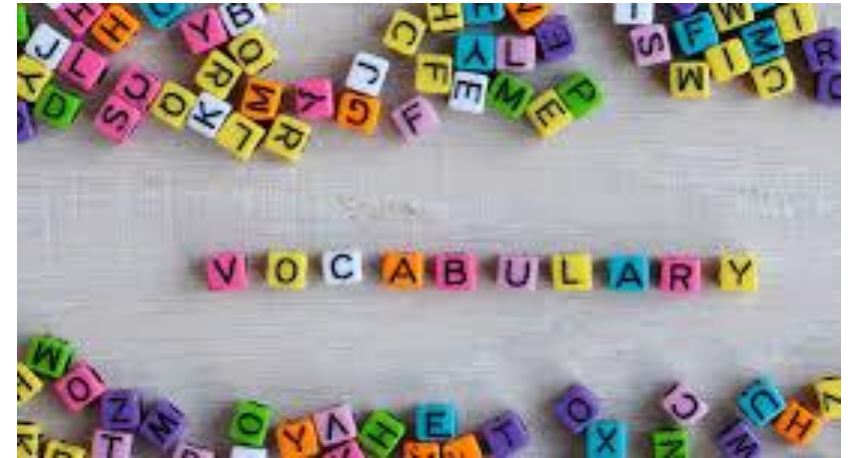
Reducing risk (current research)

Work at an Alternative Provision.

Affirmative Enquiry.

- 1 in 8 young people Not in Employment, Education or Training within a year post-compulsory education nationally in the UK.
- 56% of young people from Alternative Provisions.
- In this setting, it is 4%.
- SLCN seen as a risk factor for over half of the pupils (though note: not all – what do we know about resilience here)

Already screening for language as part of their admissions process.



Reducing risk (current research)

Talk for Work.

With Speech and Language UK.

- Programme designed to support the transition to the workplace for young people with special educational needs.

Builds on a model of self-advocacy and increasing awareness.



**Speech and
Language UK** 
Changing young lives.

Educational understandings: CSCOT

Communication Supporting Classrooms in secondary schools

- Communication Supporting Classrooms in early primary school (Dockrell et al 2015; Law et al 2019)
- Used internationally (e.g. Badar, Spencer and Clegg 2024)
- Research in whole-class interventions within secondary schools in the UK (Lowe, Henry & Joffe 2019), Australia (Starling et al 2012) leads to change for teachers and *young people*.
- Translational research is needed to get this into classrooms at scale.

Collaborative practice and transprofessional teams



Political context

- Multiple and successive global and national crises
- Pervasive cuts to public sector funding
- Substantially increasing health inequalities with reduced quality of life and life expectancy for the most vulnerable (McCartney 2022)
- ‘The impossibility of success for all’ (Spohrer 2016: 1)

What are the implications for the research we design now and how we support young people?



Educational understandings: Oracy



- Oracy education helps children in learning to, through and about talk, listening and communication. (Oracy Education Commission, 2025: 6)
- High on the political and policy agenda in the UK
- Some awareness that we need to know more about inclusion for SLCN
- Unique opportunity to support all children and young people's spoken language skills
- Situates language as contextualized, political and sociological

'Any examination of 'oracy' must [...]challenge and question how dichotomies and categories in language come to produce the idea that there are some ways of speaking which are inherently better or worse than others.'

IAN CUSHING, WRITTEN EVIDENCE TO THE COMMISSION

'Oracy education should be about developing awareness and understanding of spoken language use, not just skills. This should include becoming aware of how language variation relates to sociological and political issues. It should help students understand why they, as a speaker, may experience or exercise prejudice when they interact with someone who speaks differently.'

PROFESSOR NEIL MERCER⁹¹

Sociolinguistic understandings

The use of linguistic theory provides a roadmap to identify a child's system-level strengths and weaknesses not readily observed with traditional measures of language

Oetting, Berry and Gregory-Martin 2023: 72

- We have some accounts of how sociolinguistic theory can influence how we design assessments and interventions
- We do not have knowledge about how neurodivergence is associated with use of linguistic features to create dynamic social positions



Sociolinguistic insights

It like - **It were a better park**

Because it had... Like... A bit for each age group

So **there were a bit of like a baby bit** with all the baby climbing frame and swings

like one for older kids Like a big slide and monkey bars and
- Um I think like - Things to climb up and things like that
Um

But now there's just a tyre swing

And all - All climbing frame and swings

Sarah: But you've got memories of this park

Well **I was sat on the climbing frame** h - Once and I felt a cobweb On my face

So I looked up and **shined my torch**

And there were a big massive spider dangling above my head

It **wasn't nice** - Wasn't nice

Sociolinguistic understandings

Different nonstandard dialect features served different purposes in terms of marking social meaning.

- Implications for educational practice: not just swapping one type of talking to another; is this socio/linguistic skill being recognised and valued?
- Implications for clinical work: how do young people with DLD and other neurodivergent young people create social meanings?
- Do our intervention targets fit with the social purposes that language serves?
- Implication for theory: what features of nonstandard dialects have been studied? How does sociolinguistic theory variation accommodate, trouble or expand the notion of 'ability'?



Trans-professional understandings

Different nonstandard dialect features served different purposes in terms of marking social meaning.

Working class children's language skills are studied by:

- Psychologists (Hart & Risley 1995; Hoff 2013)
- Anthropologists (Avineri et al. 2015)
- Speech and language therapists (Law, McBean & Rush 2011; Jarrett, Hamilton & Coba-Rodriguez 2015; Spencer et al. 2017)
- Educationalists (Godley & Minnici 2008; Reaser et al. 2017)
- Sociolinguists (Eckert 2000; Moore 2010; Rampton 2011; Snell 2018)

Rarely, do these perspectives come together (though there is a lot of debate – see Cushing 2023).

What new understandings and approaches would be achieved that are not possible within traditional disciplinary boundaries?

Language as the gateway to educational fulfilment

Reconsider :



- What challenges do young people with language support needs face in terms of educational fulfilment?
- What are the knowledge and practice gaps in relation to young people and educational fulfilment in contexts of social inequality?
- How can we work across education, linguistics, psychology and speech and language therapy to produce new responses to these challenges?

What do we need to know?

What do we need to do?

Thank you!

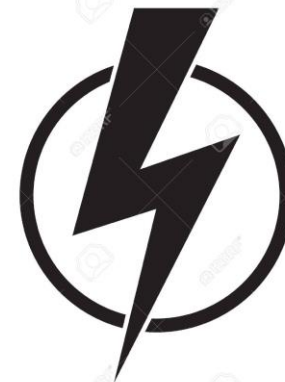
Keep in touch:

sarah.spencer@sheffield.ac.uk

Mind the gap: language development is key for inclusive education and wellbeing



The Power and Impact of Language and Communication in Adolescence and Adulthood



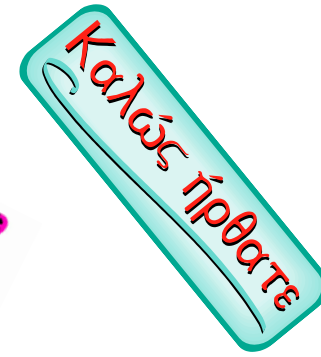
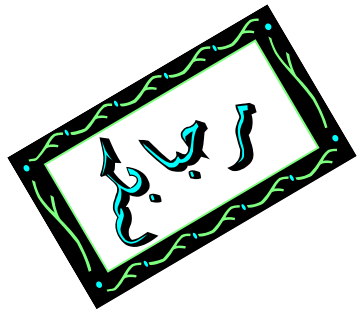
Victoria Joffe

School of Health and Social Care

University of Essex, UK

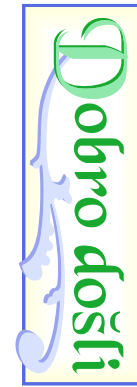
British Academy, 2025





Bienvenido

VELKOMMEN



Üdvözöljük



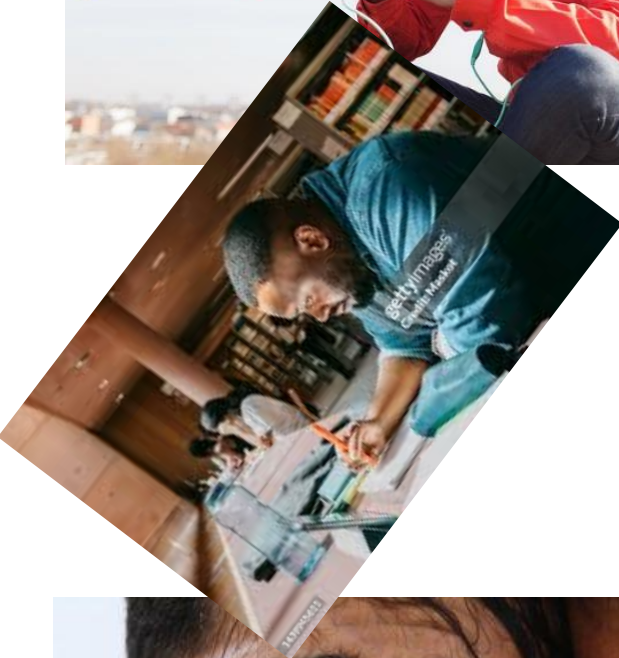


Language through



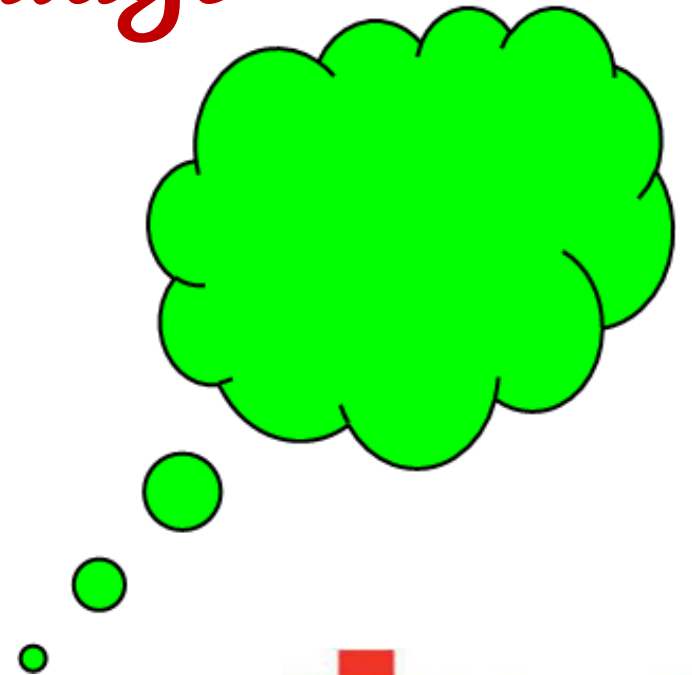
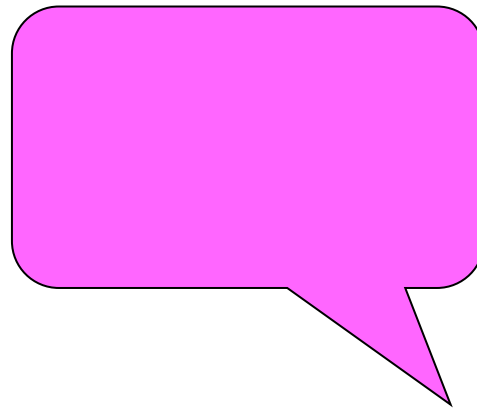
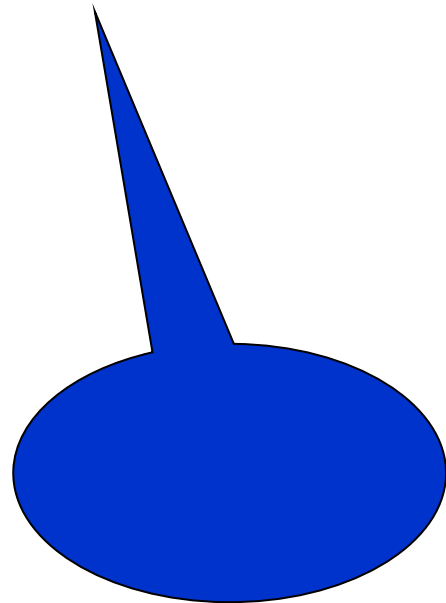
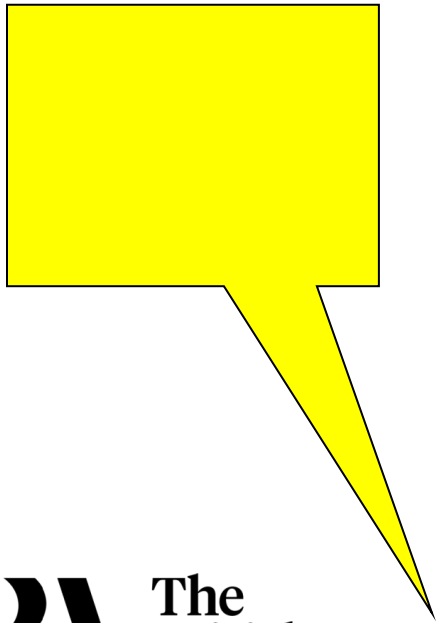


**Language is the medium through
which our lives are lived**



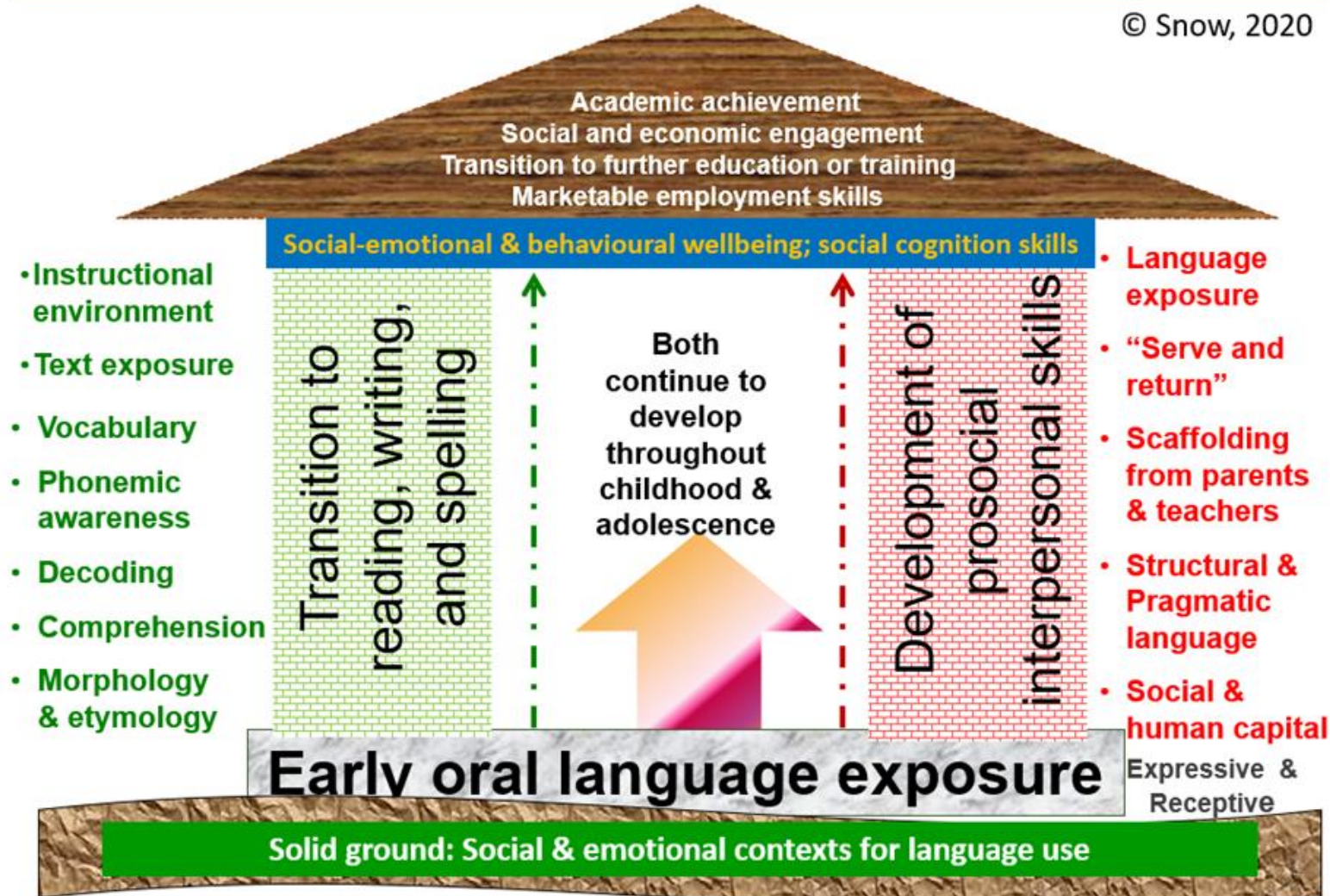
Language is the medium through which ALL lessons are taught in the classroom.

Every lesson is a language lesson



Oral language competence as a solid foundation in early life

© Snow, 2020





- ❑ Most children develop language **with ease** and without any direct explicit intervention.
- ❑ Typically developing children between 1-5 years master with apparent ease and rapidity **most of** the complexities of oral language

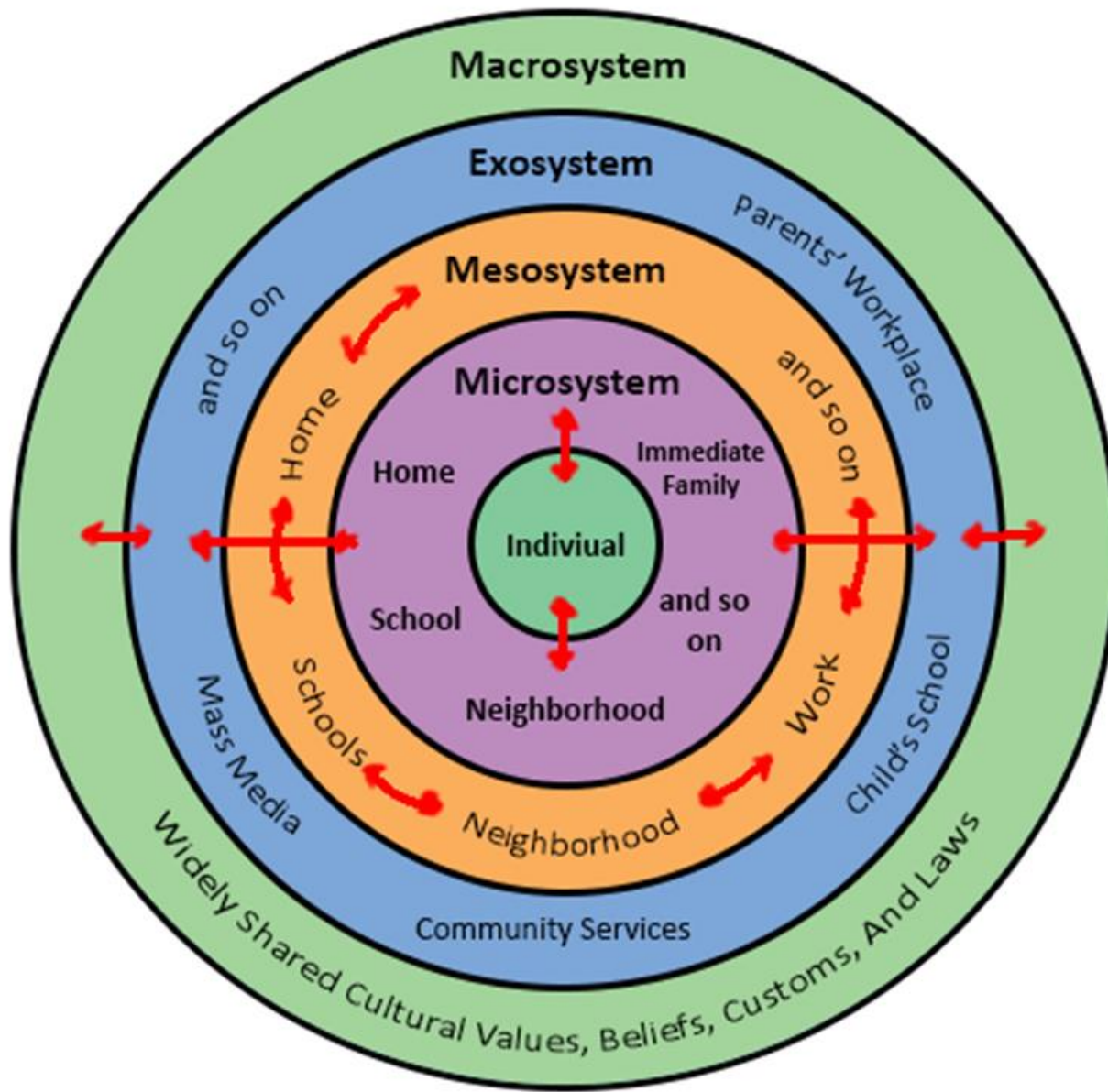


Speech, Language and Communication Needs (SLCN)

- ❑ Some children experience **significant difficulties** in developing speech, language and communication
- ❑ These difficulties arise for many different reasons. There is no one manifestation of SLCN – **HETEROGENEOUS**

Speech, Language and Communication Needs impact on ALL aspects of the **education curriculum** AND on the student's/individual's **overall development**: academic, physical, social, psychological, emotional, vocational





**Severe &
Profound LD**

EAL

**Social/Environmental
deprivation**

**Hearing
impairment**

**Specific
Learning
Difficulty (LD)**

**Social,
Emotional &
MH**

D/LD

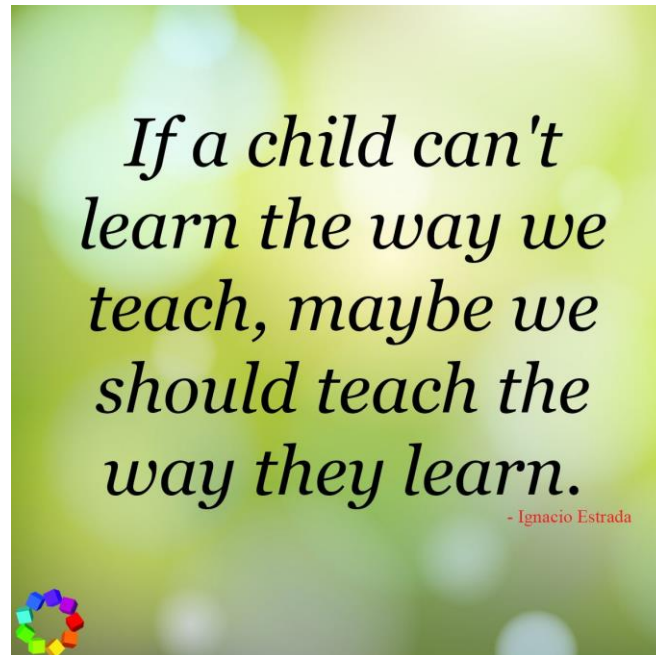
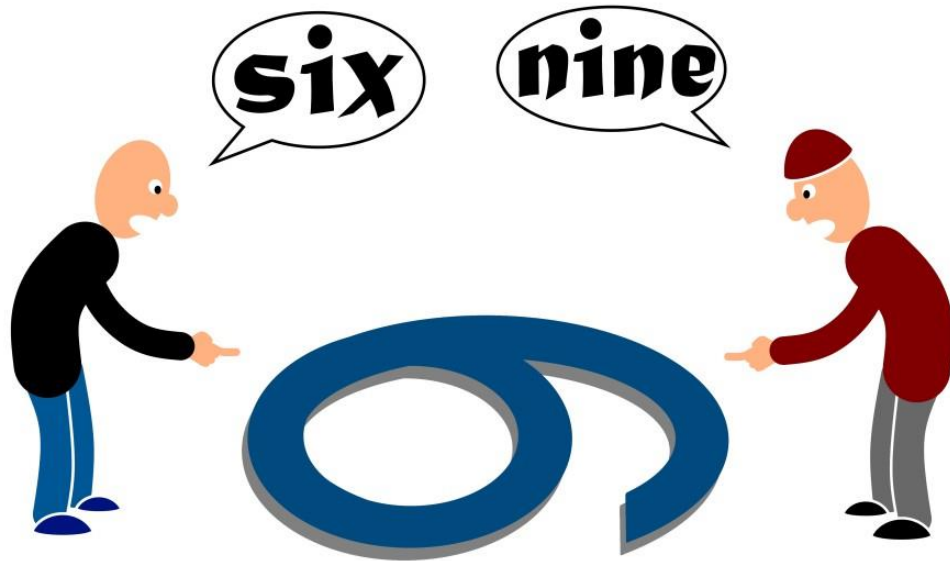
Moderate LD

ADHD

ASD

Severe LD



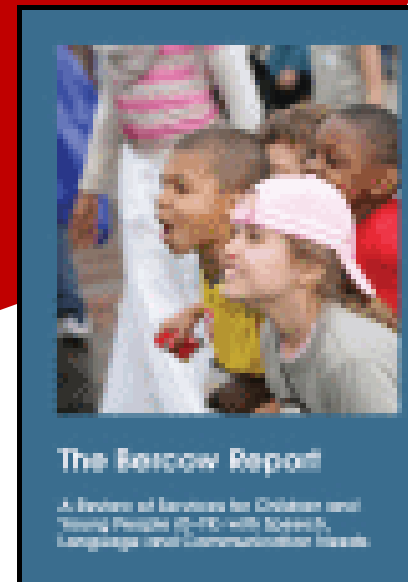




- ❑ Research into language development and disorders is **more focused on infancy, preschool and primary years**
- ❑ There is a growing body of research into the nature, prevalence and course of language disorder in older children and young people, although this is **still relatively small**
- ❑ Despite the **continued needs and challenges for some older children and young people**, there are **limited speech and language therapy resources** for the older age group and **limited speech and language therapy provision**.

“...services tended to ‘**disappear**’ over time, ...on transfer to secondary school. Indeed we found **minimal evidence of services for young people at secondary school and beyond.**”

Bercow report, 2008, p. 37.





Bercow: Ten Years On

An independent review of provision for children and young people with speech, language and communication needs in England.

Secondary schools have been ignored for a long time.

There is very little outside help for students with language problems.

You really have to have huge problems, be at the very bottom, to get any help at all, and even then it is very little.”

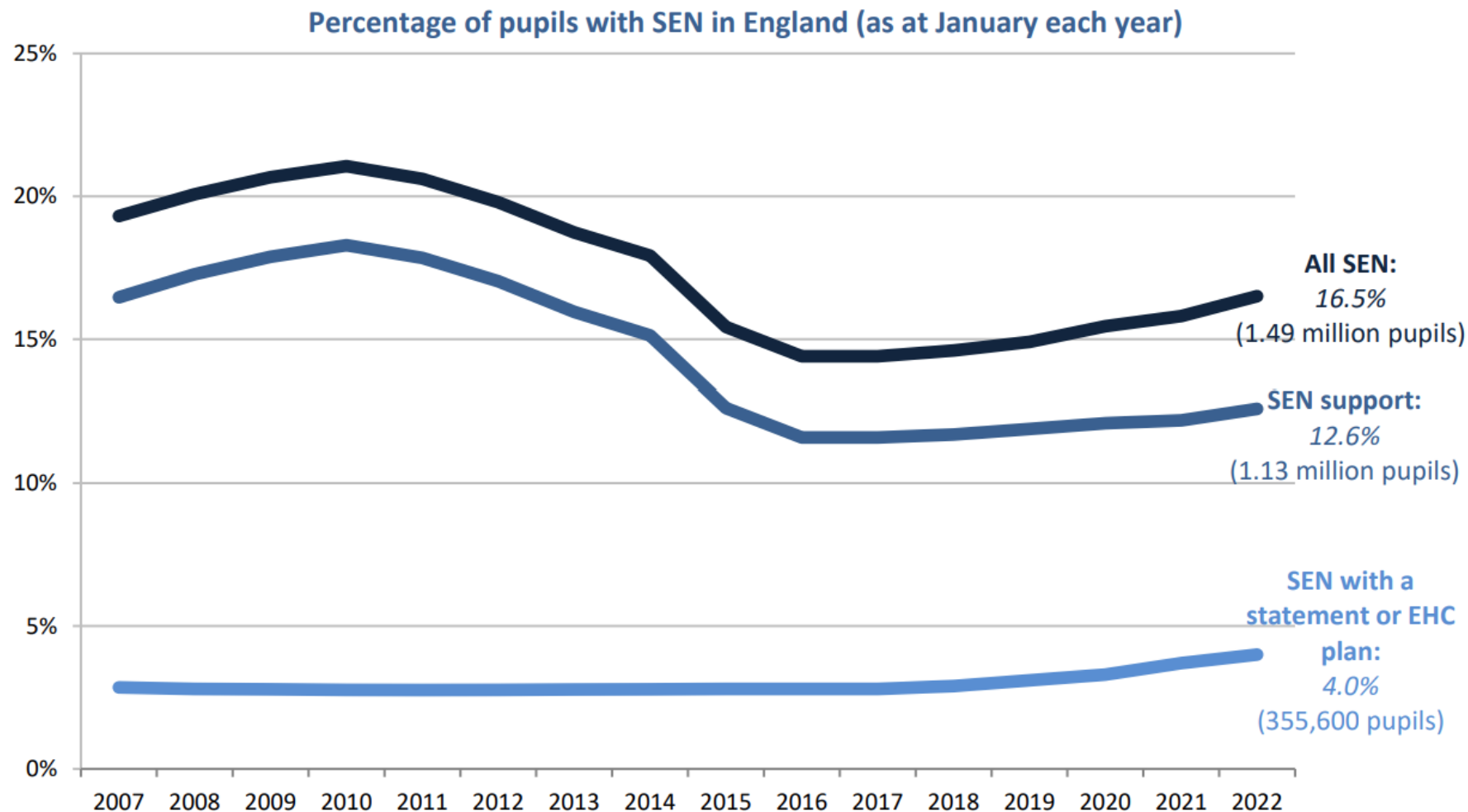
SENCO, Barking and Dagenham

Let's consider the scale of the need...



- ❑ Approximately **7%** of pre-and primary school children are identified with primary or specific SLCN (Tomblin et al., 1997; Norbury, 2016).
- ❑ Around **10%** of students in **secondary school** have SLCN.
- ❑ In areas of high social deprivation the percentage is higher, **above 50% in primary years** (Locke et al., 2002) and around **70-80% in secondary school** (Spencer, 2010).

Key trends

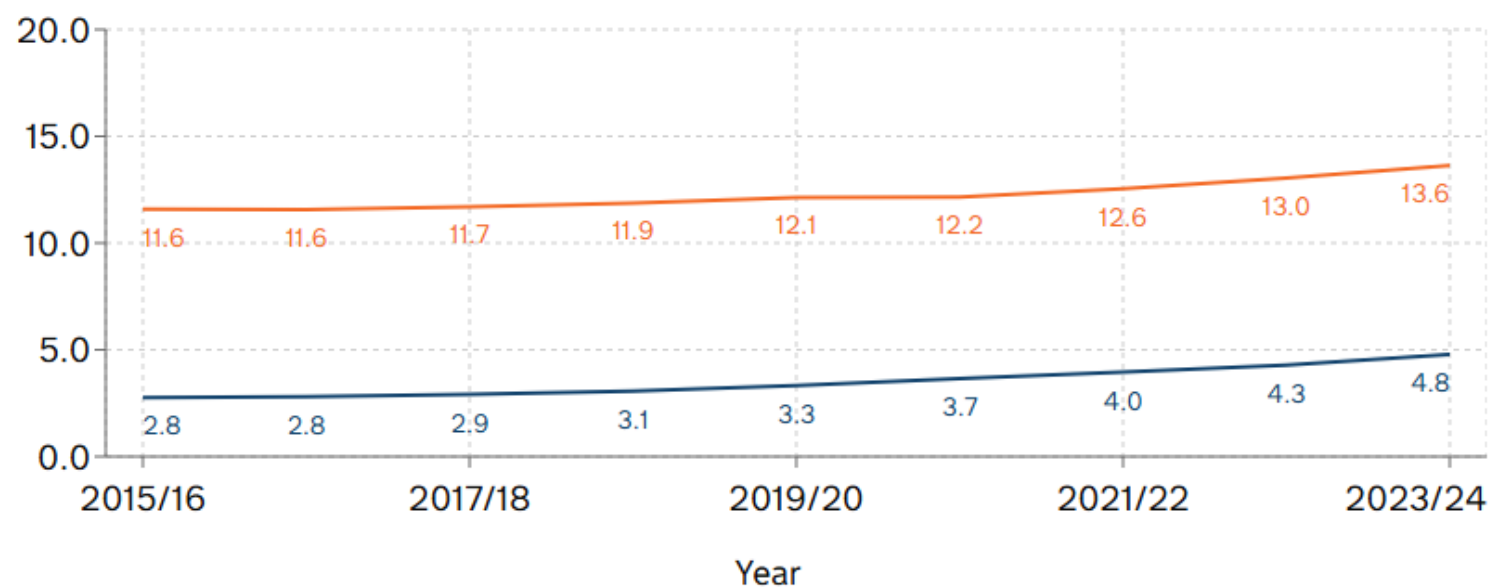


Source: School Census

Chart

Table

Percentage of pupils with SEN, by type of SEN provision, all schools, 2015/16 to 2023/24



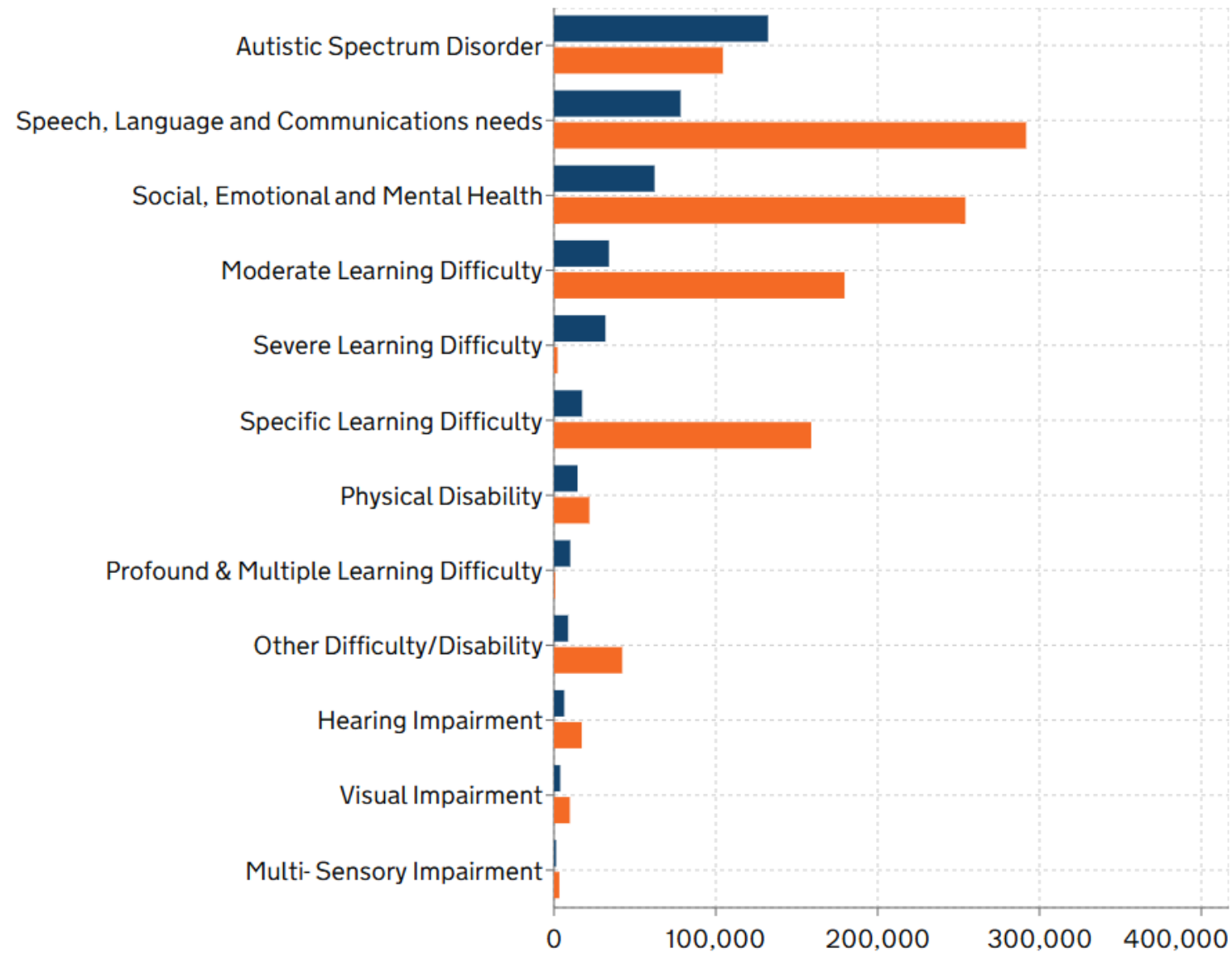
— SEN support/SEN without an EHC plan (%)

— EHC plans (%)

Footnotes

1. Includes state-funded nursery, primary, secondary and special schools, non-maintained special schools, state-funded alternative provision schools and independent schools
2. Includes pupils with SEN support in state-funded schools and pupils with SEN without an EHC plan in Independent schools

Number of pupils with an EHC plan or SEN support, by type of need, 2023/24



■ Headcount (EHC plans, England, 2023/24)
■ Headcount (SEN Support, England, 2023/24)

- ❑ It is well accepted that language development does not stop at age 5 or 11 years, but develops in **complexity** and **abstractness** throughout the adolescent period (Nippold, 1998; Berman, 2004).
- ❑ Changes in adolescent language are more **subtle** and **gradual** and hence are more difficult to record (Nippold, 2007)
- ❑ Despite the significant changes that occur in language during adolescence, assumptions are still made about **language development being complete** before adolescence.

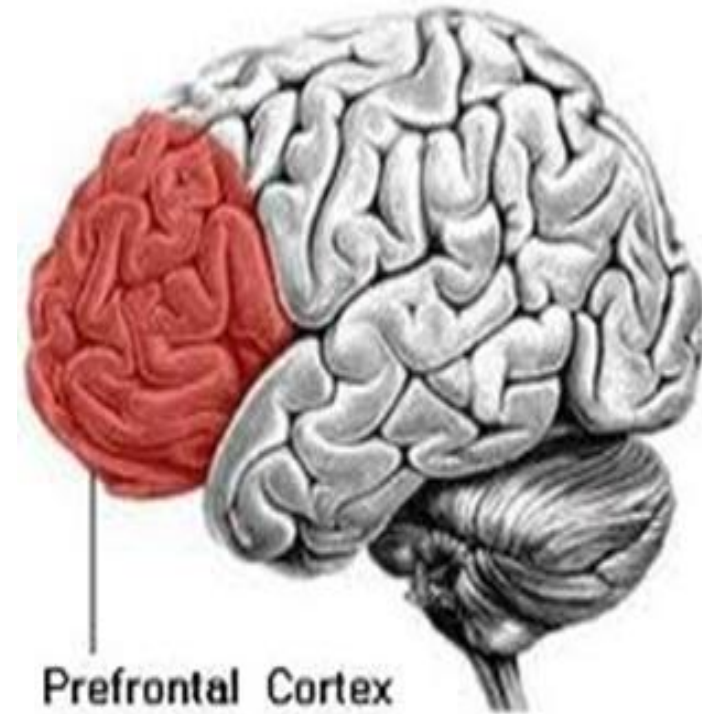
As Berman (2004) concluded from linguistic investigations in older typically developing children

*'becoming a **NATIVE** speaker is a rapid and highly efficient process, but becoming a **PROFICIENT** speaker takes a long time'*

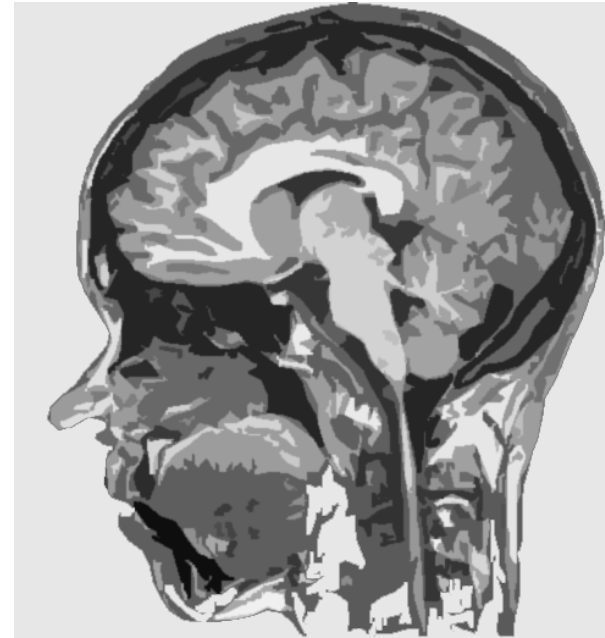
(Berman, 2004, p. 10)

❑ Research has shown how the brain continues to **develop structurally and functionally** during adolescence

❑ Blakemore and colleagues report changes that occur during adolescence, particularly in the **prefrontal cortex**



- Self-regulation and self-control
- Planning
- Inhibiting inappropriate actions
- Problem solving
- Multi-tasking
- Decision making
- Self awareness
- Social interaction



Teaching, learning and rehabilitation are **essential** and important during adolescence as the brain seems to be particularly **malleable** during this period



Blakemore, 2012

What do we know?



- ❑ Studies show that early language and communication impairments do **NOT** disappear (Clegg et al., 2005; Conti-Ramsden et al., 2001; Durkin et al., 2017; Ekström et al., 2023; Johnson et al., 2010; Nudel et al., 2023; Snowling et al., 2006; Stothard et al., 1998)
- ❑ **pervasive** and **persist** into adolescence and adulthood
- ❑ D/LD can be a **long-term difficulty** affecting all aspects of life including academic attainment, literacy, mental health, isolation, victimization and employment (Ekström et al., 2023; Law et al., 2013; Nudel et al., 2023; van Bedem et al., 2018a; 2018b)
- ❑ **Impact** of SLCN can be significant

Ekström et al., (2023). 'It depends on who I'm with': **How young people with DLD describe their experiences of language and communication in school**. IJLCD. doi: 10.1111/1460-6984.12850.

- ❑ **AIM:** To explore the experiences of young people with DLD in mainstream school.
- ❑ **METHOD:** Used semi-structured interviews with 23 students with DLD, age 13-19 years old living in Sweden.
- ❑ **METHOD:** Interviews were conducted using Zoom. Reflexive thematic analysis was used to analyse the data.

❑ **RESULTS:** Four main themes relating to experiences of language and communication in the school context were identified:

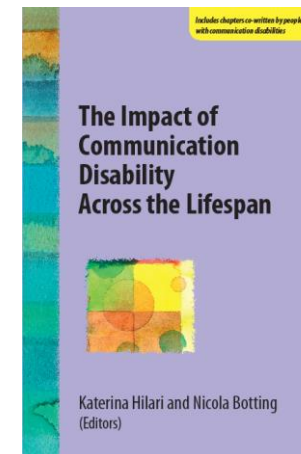
- Feelings of **inadequacy** and comparisons with others
- Feelings of being **misjudged** and **misunderstood**
- Importance of feeling **safe and comfortable**
- Importance of the **social and communicative environment**.

❑ Participants perceived their language and communication abilities as dependent on both **individual characteristics** and abilities, AND on **situational, contextual and social factors**.

“I am not a big fan of school. I don’t have a lot of good memories...I didn’t have a lot of great friends. And I got bullied in school.

I was going to mention about the **homework**. Because that what I really remember from school. The homework, it just took over my home life - evenings and weekends. And it just didn’t make me **socialize**, like my friends, they socialized. So they can do their homework in their lunch time but they spent more time socializing when I spent all my time on homework. **It just took over**. I had to. It was real **difficult**. ”

(Abigail Beverly from: Joffe et al, My Speech, Language and Communication – “A real kind of overwhelming kind of challenge sometime.” The impact of Communication Disability across the Lifespan by Hilari and Botting, (2011)



What might it be like for the young person in secondary school student with SLCN?



Linguistic demands of a text used in KS 3 (11-14 years)

- ☐ complex sentence structure
- ☐ subject specific terminology
- ☐ complex vocabulary (tier 2 and tier 3)
- ☐ idiomatic and figurative language
- ☐ complex temporal and causal relationships



*“The old man was thin and **gaunt** with deep wrinkles in the back of his neck. The brown blotches of the **benevolent skin cancer** of the sun brings from its reflection on the tropic sea were on his cheeks. **The blotches ran well down the sides of his face and his hands had the deep-creased scars from handling heavy fish on the cords.** But none of these scars were fresh. They were **as old as erosions in a fishless desert.**”*

Hemingway, Ernest (1978) *The Old Man and the Sea*, Heinemann, London, p5.

Examples:

❑ Metaphors:



- “Think of each individual vertebra as a bead on a string” (science)
- “Just as a beaded necklace is flexible and able to bend, so too is your vertebral column” (science)
- “Which states in the US are partially located in ‘tornado alley’”? (science)
- A graphic design with reflectional symmetry (mirror imagery) is described as having a “butterfly shape” or “butterfly symmetry.” (mathematics)



❑ Similes:

- “Your skeleton is like the steel framework of a building.” (science)
- “A spinal nerve is like a two-way highway” (sensory & motor paths) (science)

Examples: Figurative Expressions in Literature

□ Idioms:

- Give someone a run for his/her money
- Give someone a break
- (Grownups) have a lot of nerve
- A teenager resolves to “make up my mind”
- A cherished piano is described as “the best that money can buy”

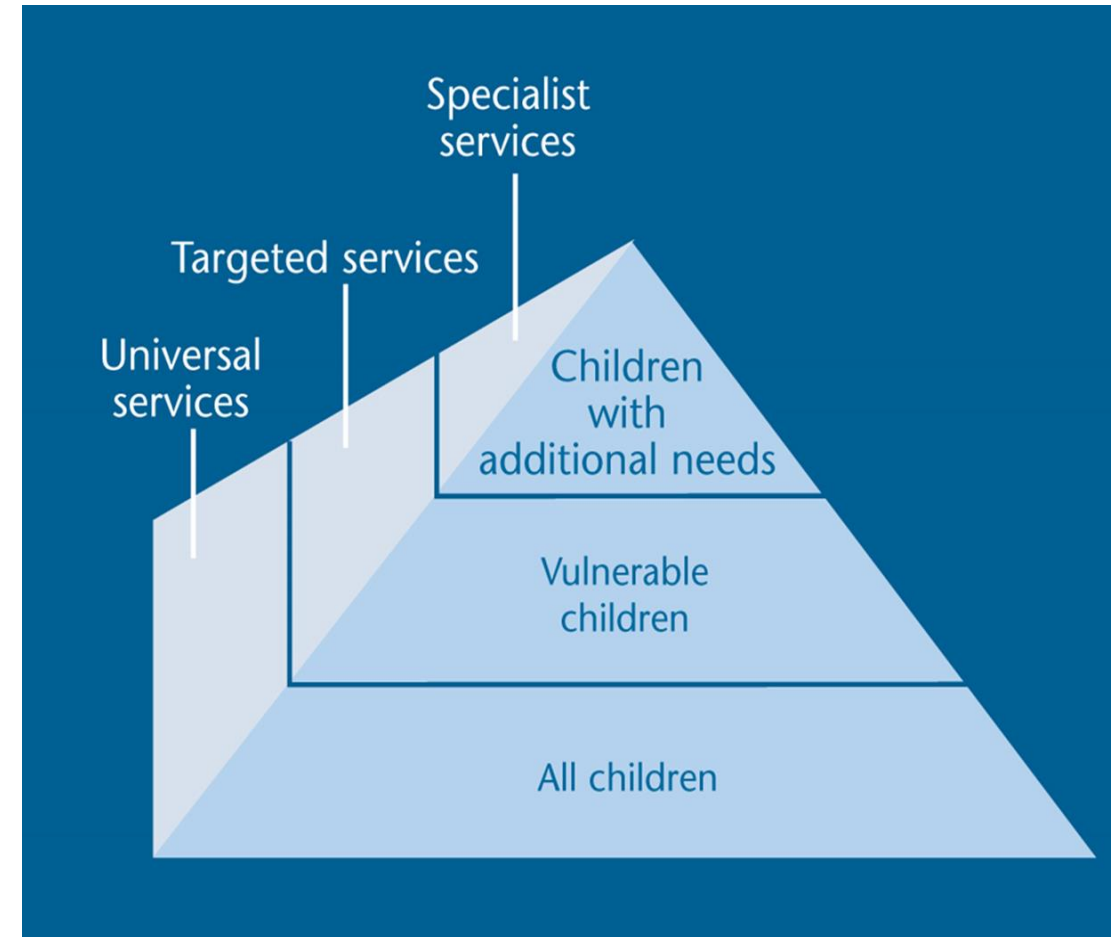


□ Personification: Sailors describing a frightening storm at sea:

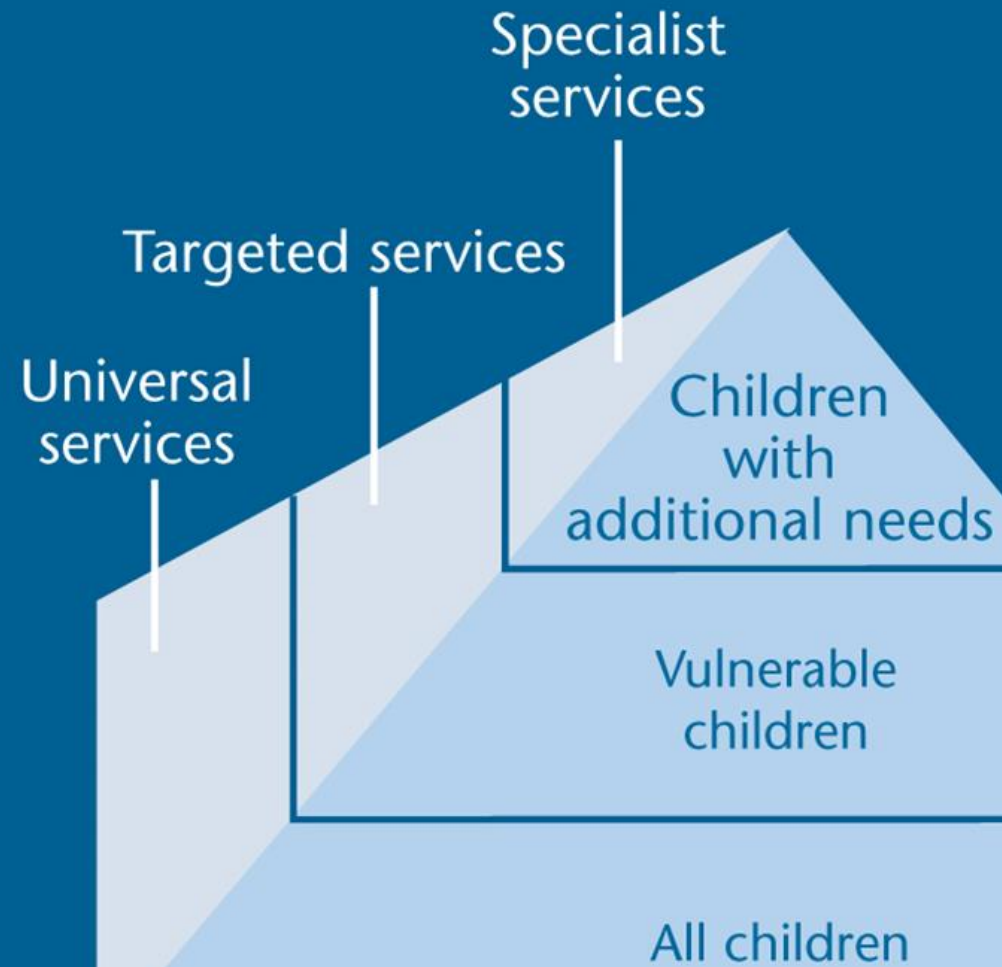
- “This mad sea shows his teeth tonight. He curls his lip, he lies in wait, with lifted teeth, as if to bite...” “These very winds forget their way”

Service Provision:

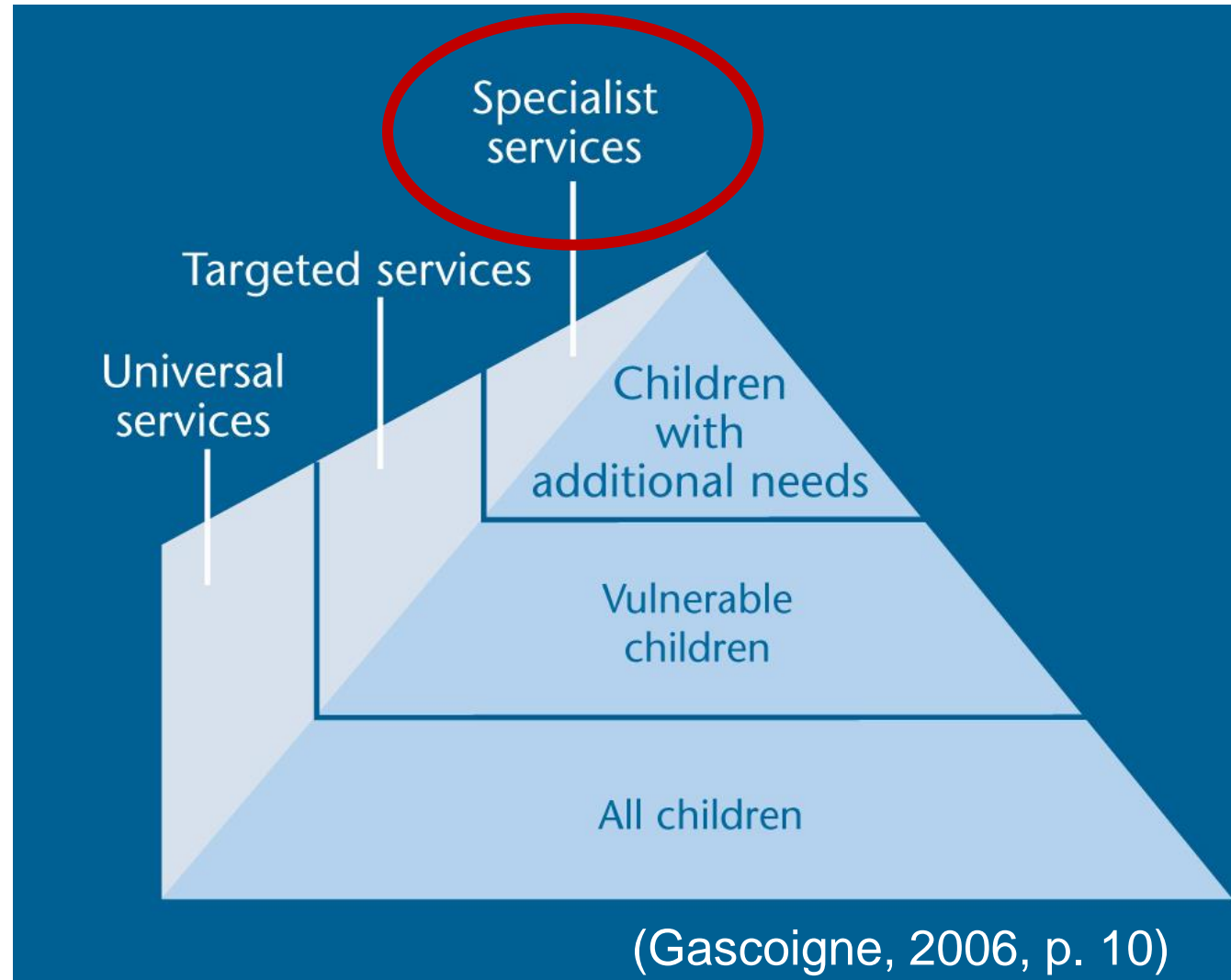
The Royal College of Speech and Language Therapists published a Position Paper in 2006 on best practice in supporting Children and Young People (CYP) with SLCN, referring to the concept of **universal** (for all CYP), **targeted** (for those at risk or vulnerable) and **specialist** (for those requiring individualised and more specialist support) levels of support (Gascoigne, 2006).





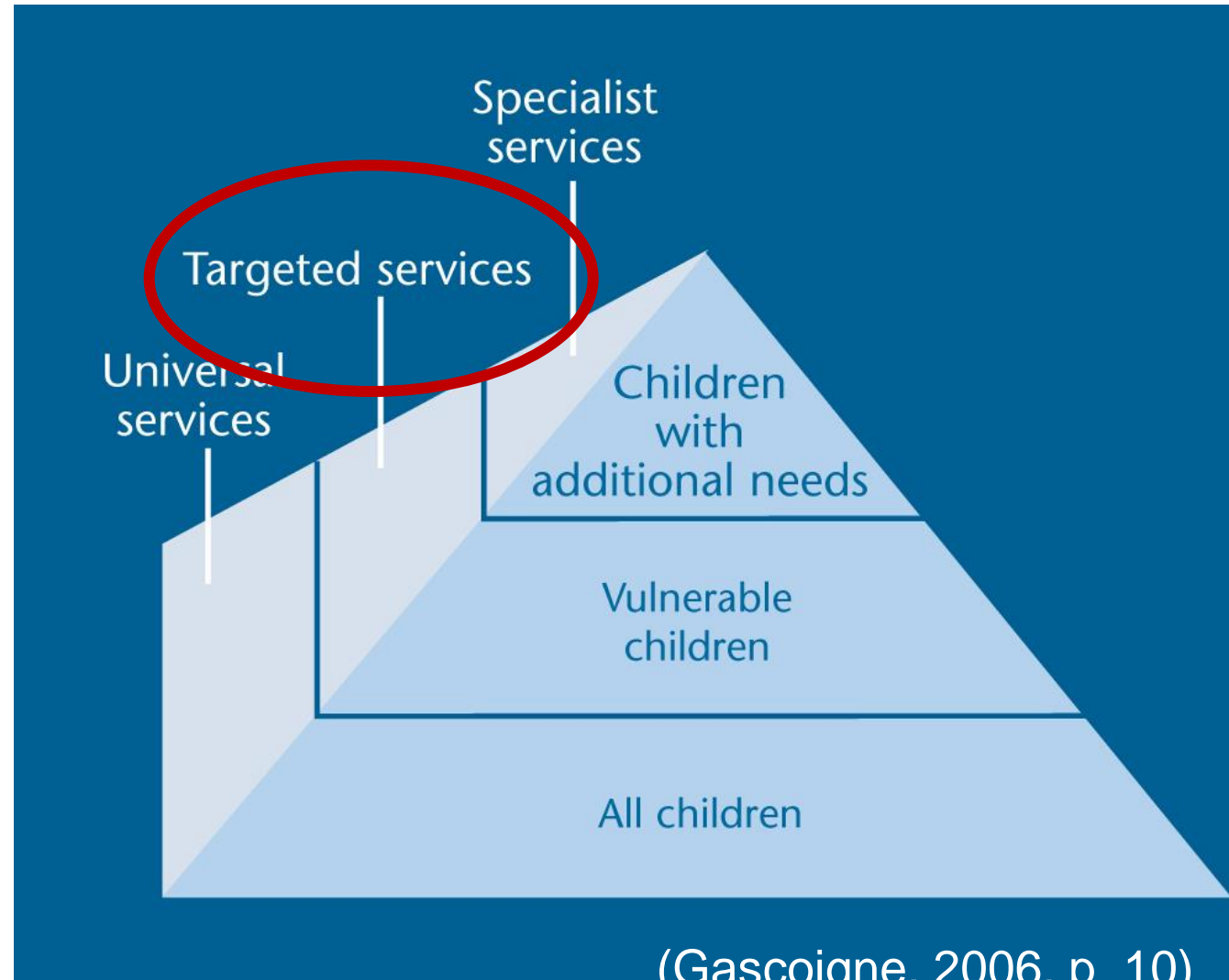


Levels of service provision



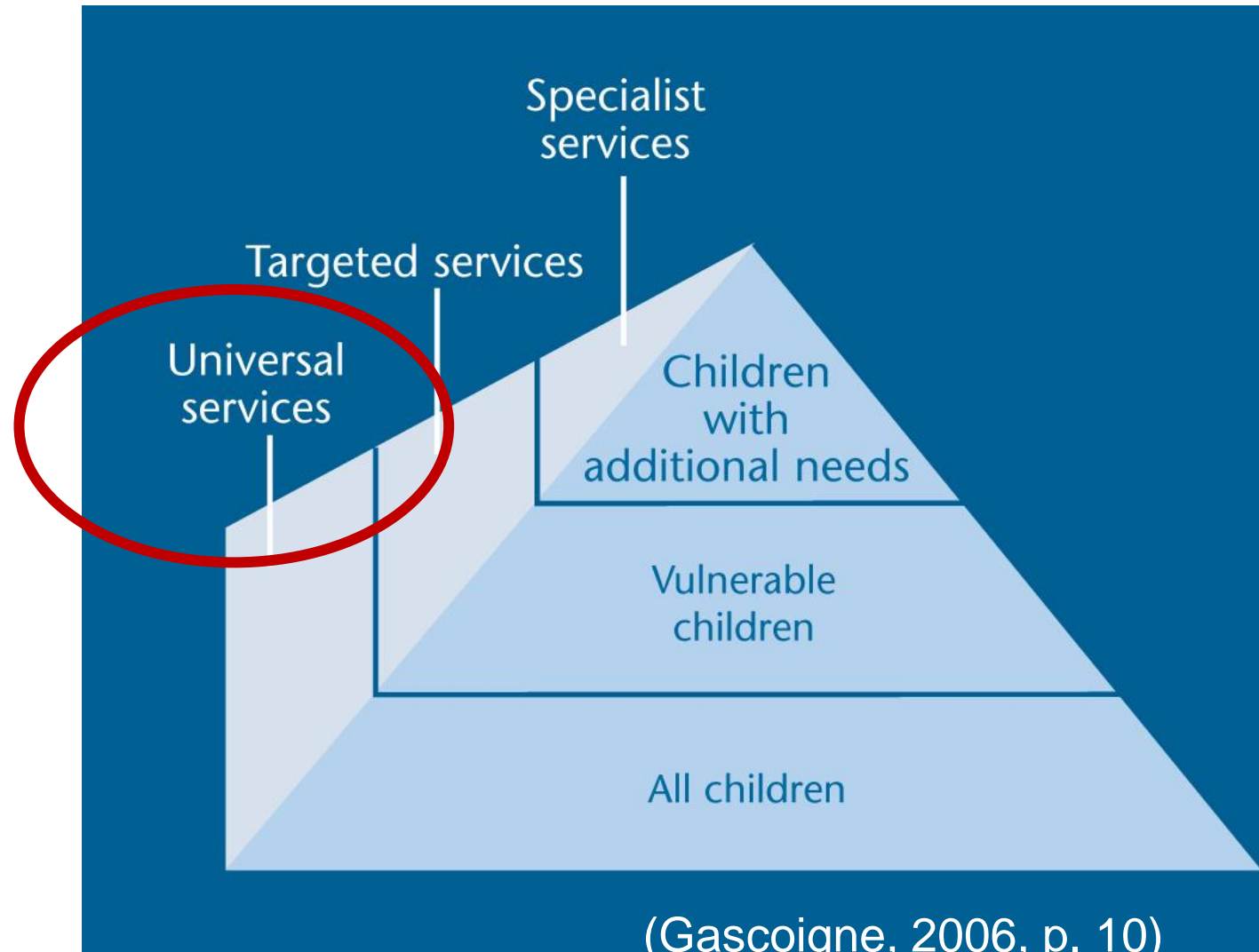
- ❑ Evidence exists for the effectiveness of **vocabulary interventions** in adolescence at **specialist levels of provision**:
 - (Ebbels et al., 2012 on **semantic intervention**, and Wright et al, 2018 with **vocabulary enrichment**).

Levels of service provision



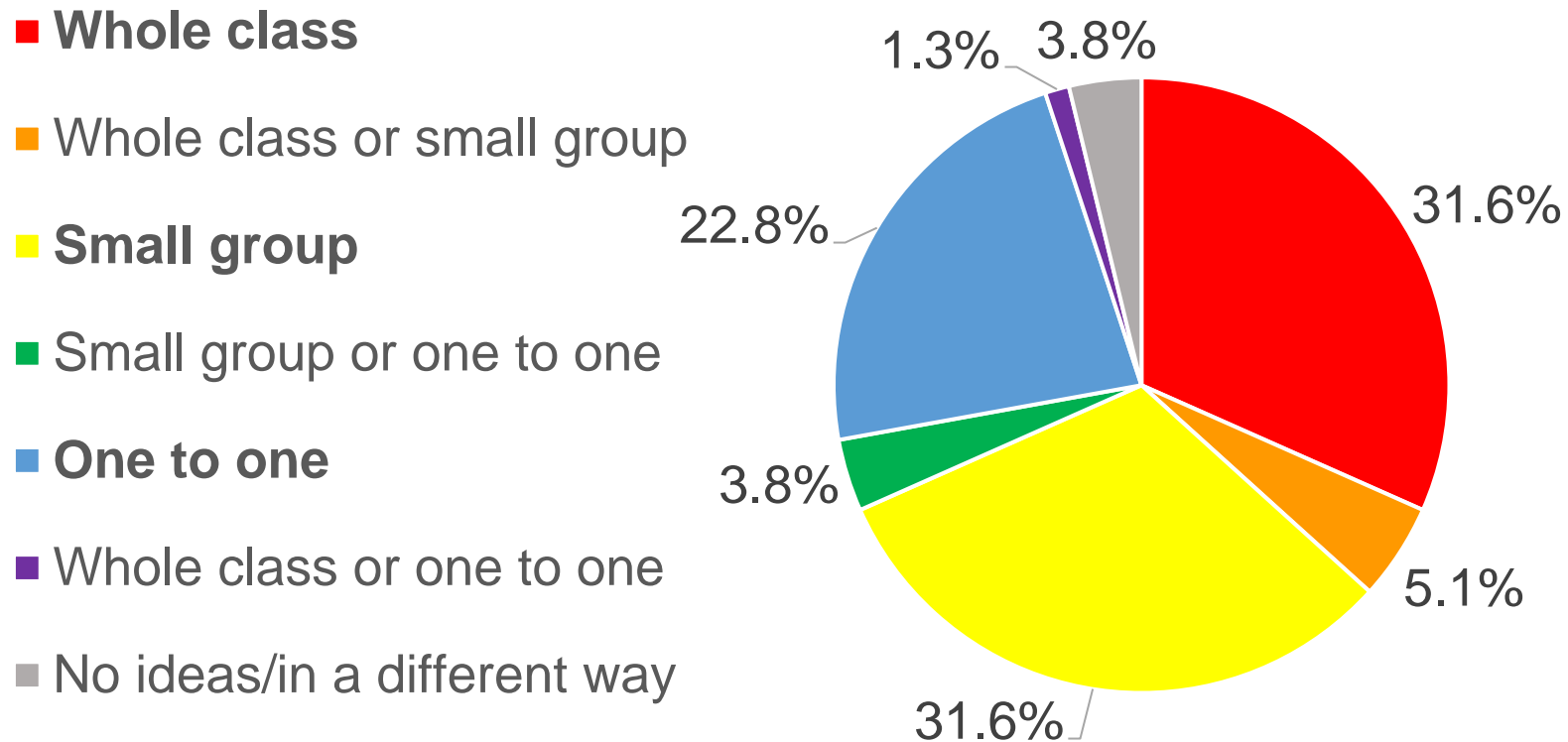
- ❑ Evidence exists for the effectiveness of vocabulary interventions in adolescence at **specialist and targeted levels of provision:**
 - (Ebbels et al., 2012 on **semantic intervention**, and Wright et al, 2018 with **vocabulary enrichment**).
 - **ELCISS** – Enhancing Language and Communication in Secondary Schools – Vocabulary and Narrative Enrichment Programmes (Joffe et al., 2019)

Levels of service provision



- ❑ Evidence exists for the effectiveness of vocabulary interventions in adolescence at **specialist, targeted and universal levels of provision:**
 - (Ebbels et al., 2012 on **semantic intervention**, and Wright et al, 2018 with **vocabulary enrichment**.
 - **ELCISS** – Enhancing Language and Communication in Secondary Schools – Vocabulary and Narrative Enrichment Programmes (Joffe et al., 2019)
 - **Word Discovery:** Universal vocabulary intervention delivered in the classroom by the teacher with SLT support (Lowe et al, 2018)

Students' preference for model of intervention delivery



Implications

- ❑ SLT support **at each level of service provision** (for example, visual timetables, Lego Therapy)
- ❑ **Flexible SLT services** are ideal (**needs-led approach**)
- ❑ Greater emphasis on **inter-professional practice** between SLTs and teaching staff
- ❑ **Time**
- ❑ **High Quality** initial AND **ongoing training**
- ❑ **Ensure understanding** of the how's, what's and why's – background knowledge, rationale, aims etc

Implications

Factors to take into account when choosing which **model of intervention is appropriate** for CYP scent with SLCN (Lowe and Joffe, 2018):

- ☐ The language and cognitive profile of the student
- ☐ Student preferences
- ☐ Applicability to the curriculum/social contexts
- ☐ Staff expertise
- ☐ Staffing resources.

Inequalities in Service Provision

- ❑ Over 1.5 million CYP in England have identified special educational needs (SEN) with their **prevalence increasing over consecutive years**: 14.4% of all pupils in 2016 to 15.5% in 2020, and an increase of 87,000 pupils from 2022 to 2023 (National Statistics, 2023; 2016; 2020).
- ❑ Many CYP with Special Educational Needs and/or Disabilities (SEND) are educated in **mainstream schools** (Ofsted, 2021)
- ❑ There are **variations in practices** and **marked inconsistencies** in service provision to CYP with SEND (Ofsted, 2021) with reports of unmet need and limited availability of services (RCSLT, ASLTIP, 2023; RCOT, 2023).

- ❑ In June 2023, the Department of Health published the **NHS Long Term Workforce Plan** to outline how it would **meet the gaps in service provision** and target growing needs of the UK population



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Thousands to lose jobs as Starmer scraps NHS England to cut 'bureaucracy'

13 March 2025



Half of staff at NHS England could be cut under 'radical' restructuring



Craig Munro

Published March 11, 2025 10:35am Updated March 11, 2025 10:46am



Comments



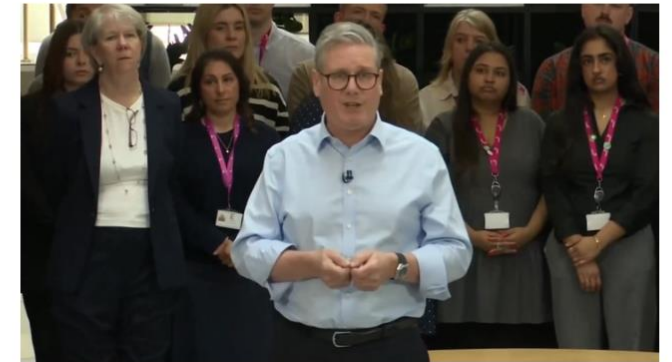
The job losses will affect the NHS executive body in England (Picture: Peter Dazeley/Getty Images)

NHS England could lose half of its officials under major restructuring plans, the health service's leaders have said.

NHS England abolished to return healthcare to government control

Kate Devlin, Archie Mitchell & Millie Cooke

Thursday 13 March 2025 15:33 GMT



Thousands of NHS England jobs at risk in 'radical reduction and reshaping'

Roles at the central NHS body could 'decrease by around half' under new interim chief executive Sir Jim Mackey

Ella Pickover • Tuesday 11 March 2025 09:04 GMT



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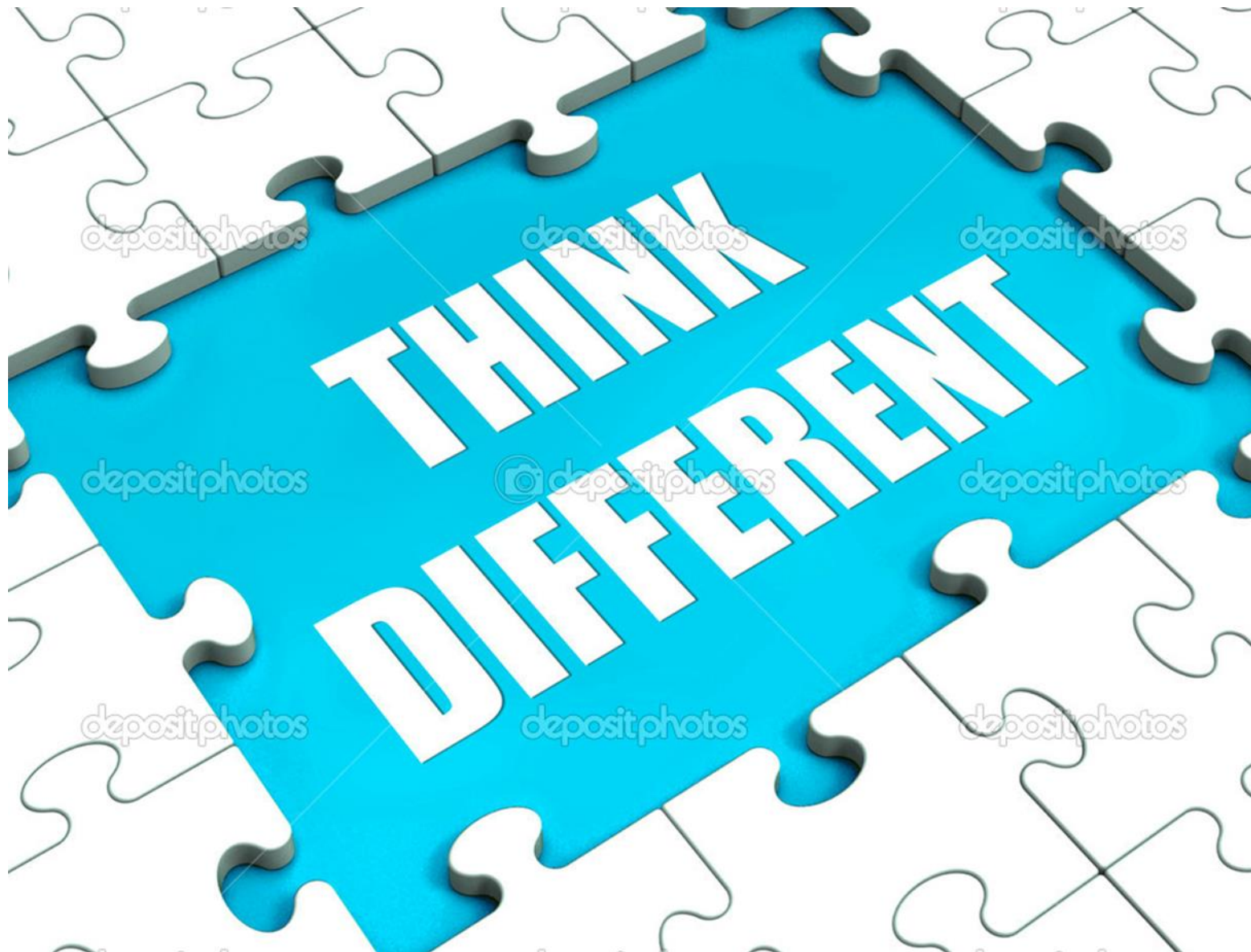


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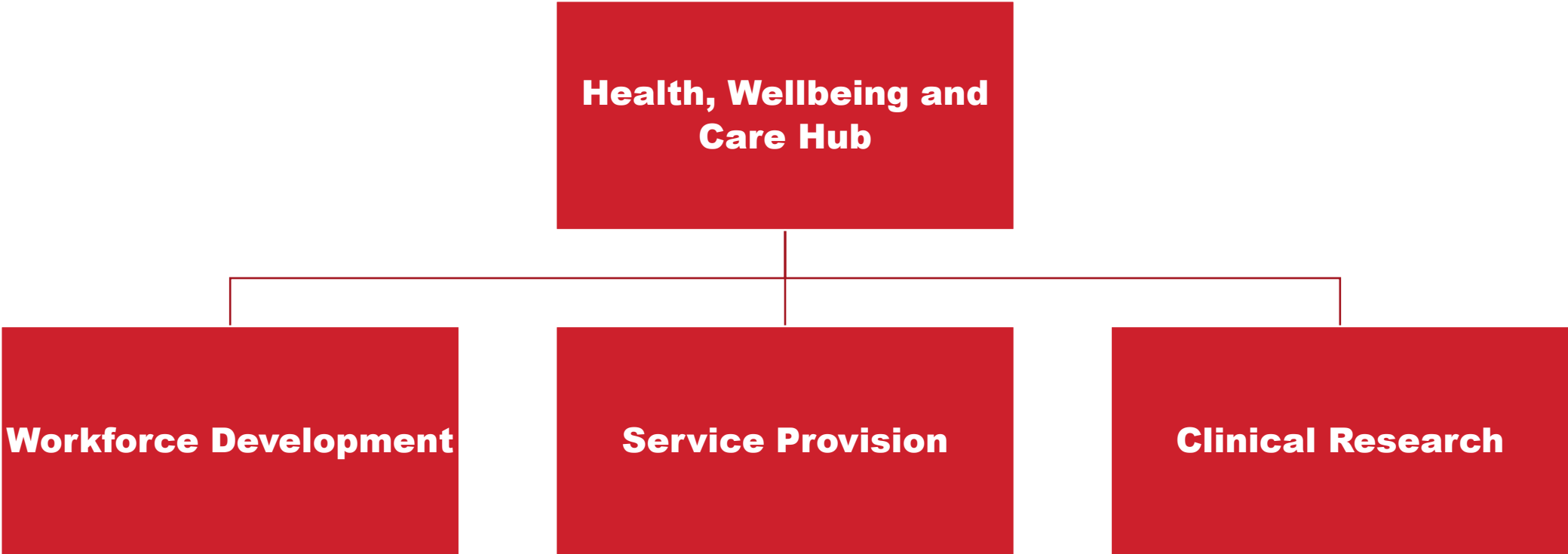




Health, Wellbeing and Care Hub



The Three Pillars







Adults with D/LD

**Children and Young
People in Care**



**Young People who
are homeless**



Aim:

Exploring the views of young people with SLCN, their parents, specialist teachers and speech and language therapists

- ❑ Run one **focus group** with 5 young people with SLCN (age range: 19 – 31 years) – all attended a secondary school with a language provision
- ❑ Completed one **interview** with young person with SLCN (in 30's)
- ❑ Completed **interviews with a specialist teacher** at language resource, a **parent** of a YP with SLCN and a **specialist speech and language therapist** working with this group

Emerging Themes:

- ❑ Poor identification of needs across school years, from preschool onwards
- ❑ Limited specialist support (unless EHCP – Education Help and Care Plan)
- ❑ Unhappiness at School, feelings of isolation
- ❑ Desire to communicate, but afraid to or not having language to do so)
- ❑ Feelings of isolation and lack of support post-secondary school
- ❑ Difficulties with Socialisation
- ❑ Difficulties making friends and socialisation
- ❑ Friendships - unequal, different expectations

Emerging Themes:

- ❑ Sense of vulnerability and naivety
- ❑ Reflective/Lack of reflection
- ❑ Need for greater independence
- ❑ Desire to meet and spend time with people who “are like me”
- ❑ Masking/hiding difficulties
- ❑ Challenges in Employment
- ❑ Fearful of future

“Need to acknowledge these adults want to be part of society, want to do well, want to be successful, but it’s hard, need someone to be their advocate”

Specialist Teacher



Person at Centre of all Provision



Collaboration is key to all we do.





Mid and South Essex
Integrated Care
System



Colchester
City Council



CAN DO
HEALTH & CARE
Suffolk & North East Essex
Integrated Care System

Tendring
District Council



COLCHESTER KORBAN
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 **KORBAN**
Breaking the cycle of homelessness for young people in Colchester

 **Southend-on-Sea**
City Council

 **The
British
Academy**



**Headway
Essex**

 **University
of Essex**



Welcome to
Colchester Korban
Project



Providing
supported
housing for
16-25 year olds



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European Speech and Language Therapy Association

ESLA Expert Group in Adults with DLD

Language and Communication



University of Essex

THANKS FOR LISTENING

v.joffe@essex.ac.uk

@vjoffe



Coffee Break

15:15-15:30





Embedding oracy within education: challenges and opportunities

Julie Dockrell

Plan:

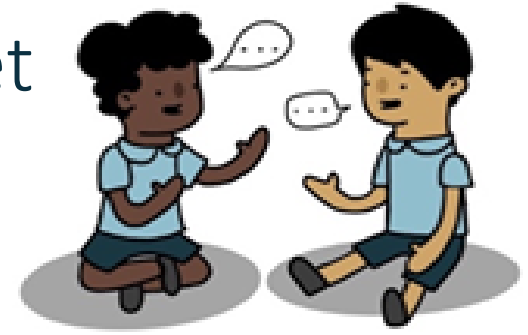
- 1) The long history of oral language and education
- 2) Where are we now?
 - a) Importance of oral language
 - b) Complexity of oral language
 - c) Children's language learning needs
 - d) Teachers' challenges
- 3) How should language nutrition be embedded within learning environments?
- 4) Moving oracy into the classroom



Oral language: the
challenge for education



Oracy has become topical 'again': yet decades of research highlight importance and challenges



"Conspicuous deficits in language and speech are a handicap which socially disadvantaged children often have.

*... adverse environmental circumstances ... children cannot conceptualise clearly or to verbalize adequately,
....their ability to profit from compensatory opportunities especially at school seems to be limited". (Raph, 1965)*



We have known

- I. Exposure to a rich vocabulary is needed to support oral language development and conversational skills AND
 - the child's writing composition and reading comprehension. Montessori (1909)
- II. The language environment is important at school entry (Heffernan, **1950**).

“he needs materials and conversation and to organize his ideas into sentences and logically related sentences”.
- III. The quality of experience the school provides will determine how rapidly the child will develop and how soon he will acquire readiness for more advanced skills.

Recommended action 1950:

Analysis of learning experiences at all maturity levels to determine which are most conducive to development

Objective measures of language development needed

Teachers and schools were challenged:

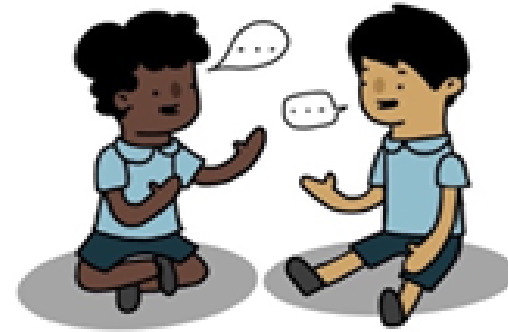
1. Survey 1950 ($N = 1,400$)

The role of language (listening, speaking, reading and writing) in the growth and development of children should be emphasized with special stress on the need for intelligent listeners *Wilt, 1950*)

2. Practitioners must be alert to

- Developmental ranges in language as related to factors in each child's language environment
- Language difficulties impairing children's reading and listening comprehension and clarity of oral and written expression
(Ruddell, 1966)

3. As early as **1937** (Netzer) developed a psychometrically valid scale to benchmark children's language productions (picture, object and story stimuli)



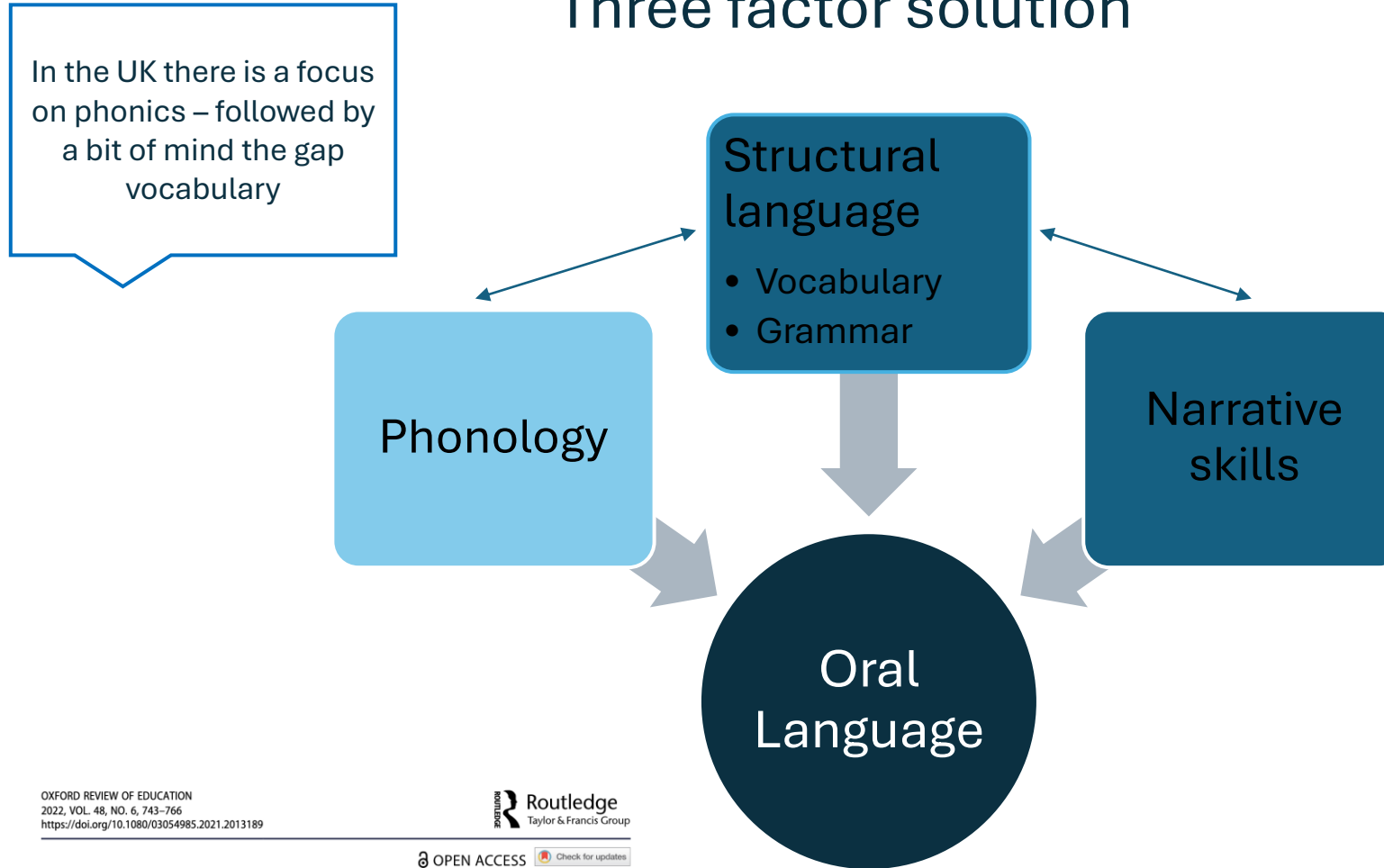
Where are we now?

Research continues to confirm oral language underpins development

- Encourages the development of cognitive skills (Juan & Astington, 2011 for example in relation to false beliefs)
- Promotes socio-emotional regulation (Sim et al., 2013, population cohort)
- Impacts reading comprehension (Schatschneider et al., 2004) and writing (Stoeckel et., 2013 population study)
- Early oral language skills support both word decoding and listening comprehension (Cervetti, et al., 2020)
- Essential for learning in school, accessing the curriculum & later academic achievement (Bleses, 2016)
- Long term - language and communication skills result in limited access to jobs and training (Johnson et al., 2010; Schoon et al., 2010)

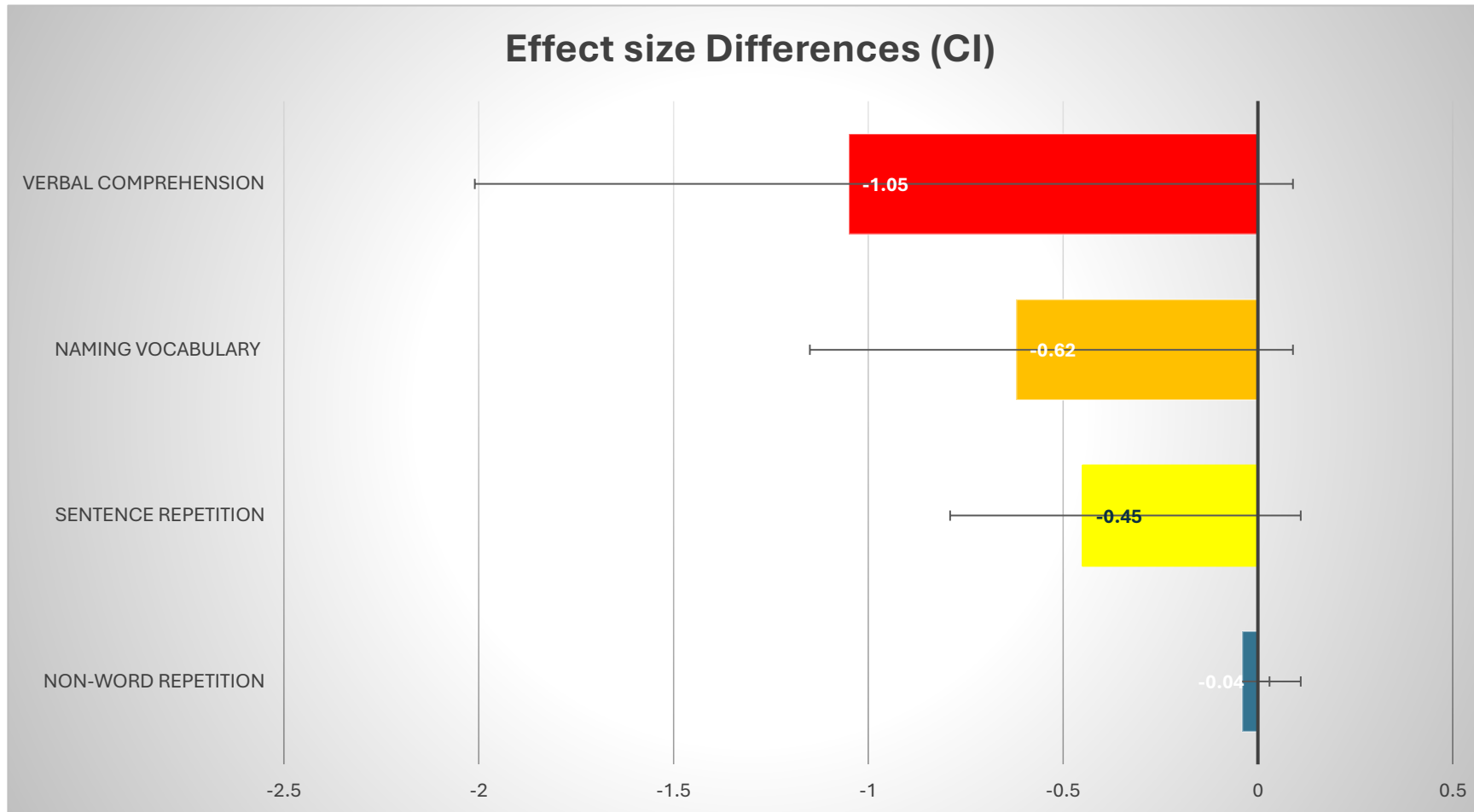
Complexity of oral language at school entry

Three factor solution



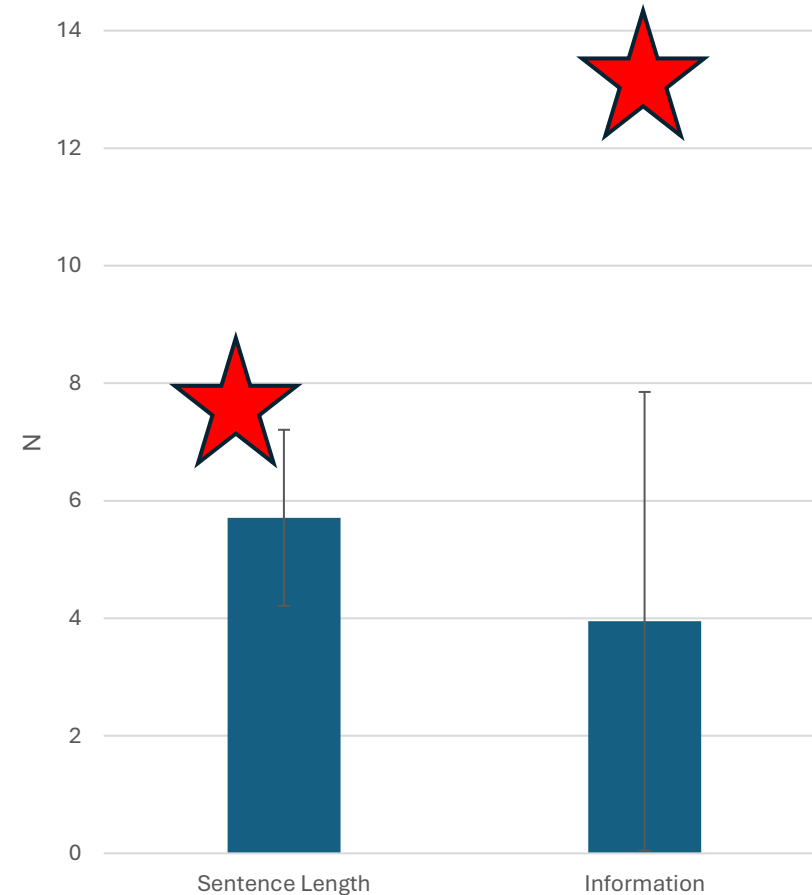
Why does it matter?

Children's language learning needs in areas of social disadvantage – effect size impact ($N = 840$)?



Children's narrative skills: Bus Story

- Narrative retell scored for information and sentence length
- Information score
 - 81% sample ($n = 706$) provided sufficient data
 - Mean information score for 3;6 is 13
- Sentence length
 - Need five sentences to score
 - 57% of the sample failed to provide five sentences ($n = 558$)
 - Mean number of words for 3;6 years is 7



Poor narrative skills

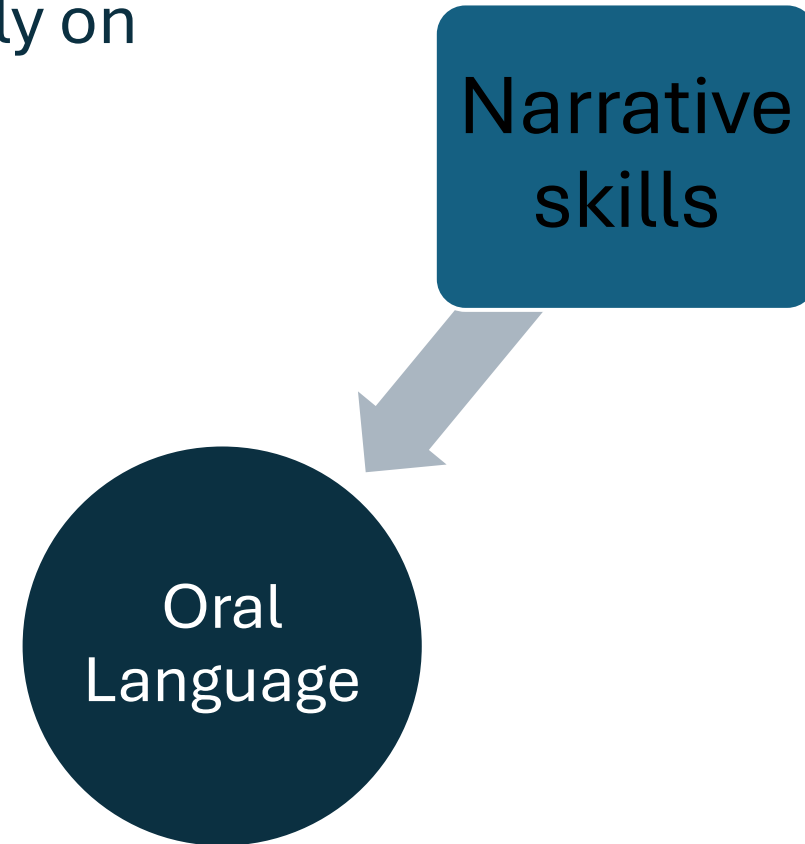
- Short sentences
- Limited detail – information score
- Focus on the here and now
- Impacts social connection with peers, family members, and other communication partners
- Contradictions
- Lack of fluency



Importance of narrative early on

- Use of extended/connected discourse
- For a communicative purpose
- Moving from context dependent to context independent

Receptive ≠ Expressive



Article

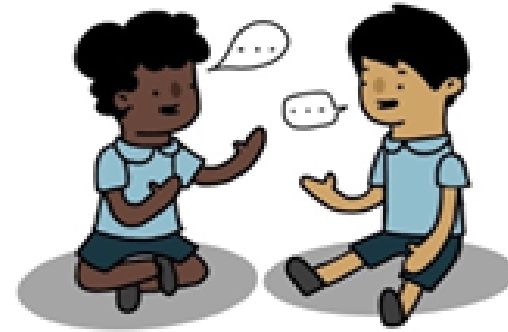
FIRST
LANGUAGE

Universal strategies for the improvement of expressive language skills in the primary classroom: A systematic review

Keeley L. Dobinson 
and Julie E. Dockrell 
UCL Institute of Education, UK

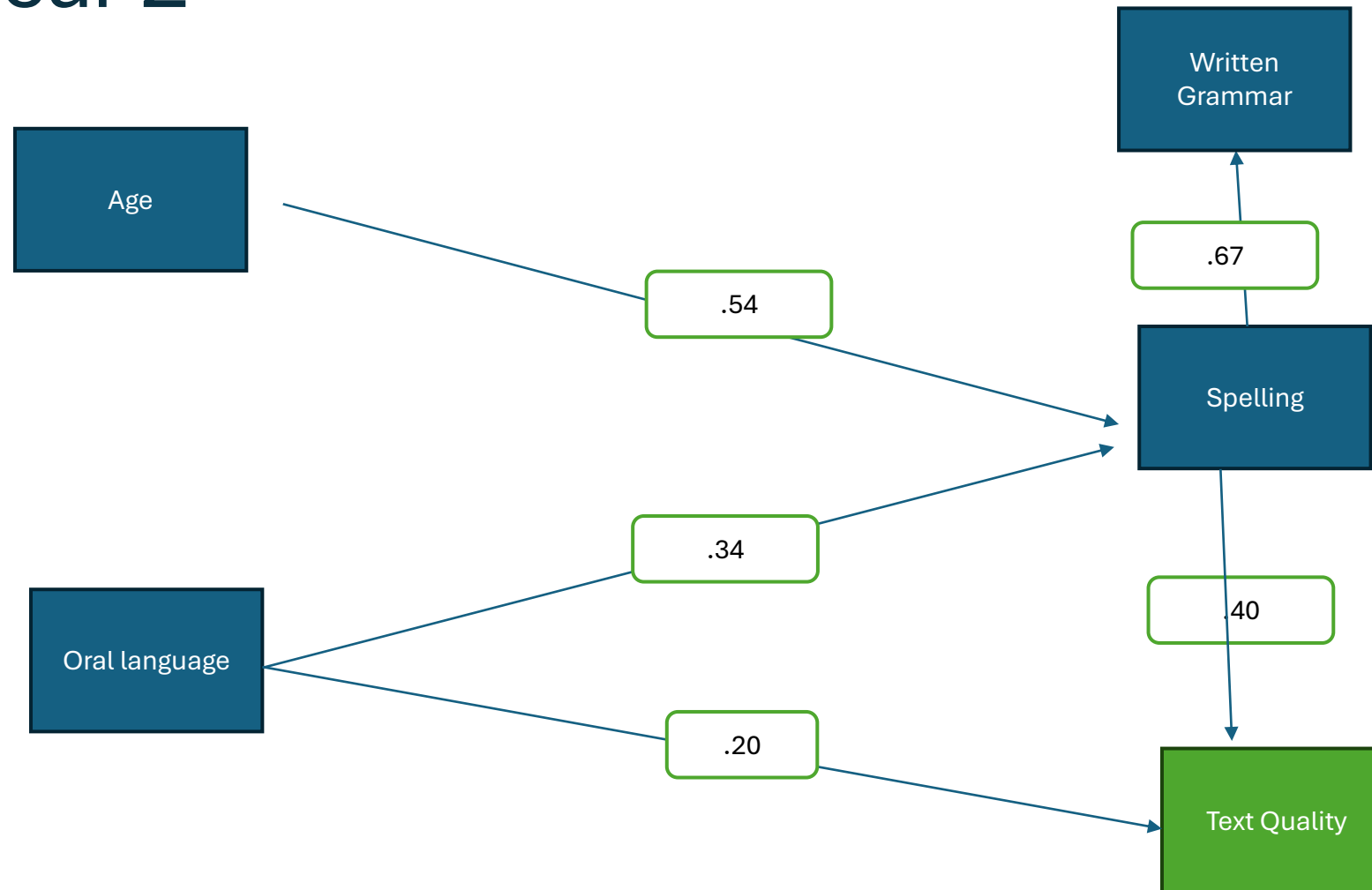
First Language
1–28
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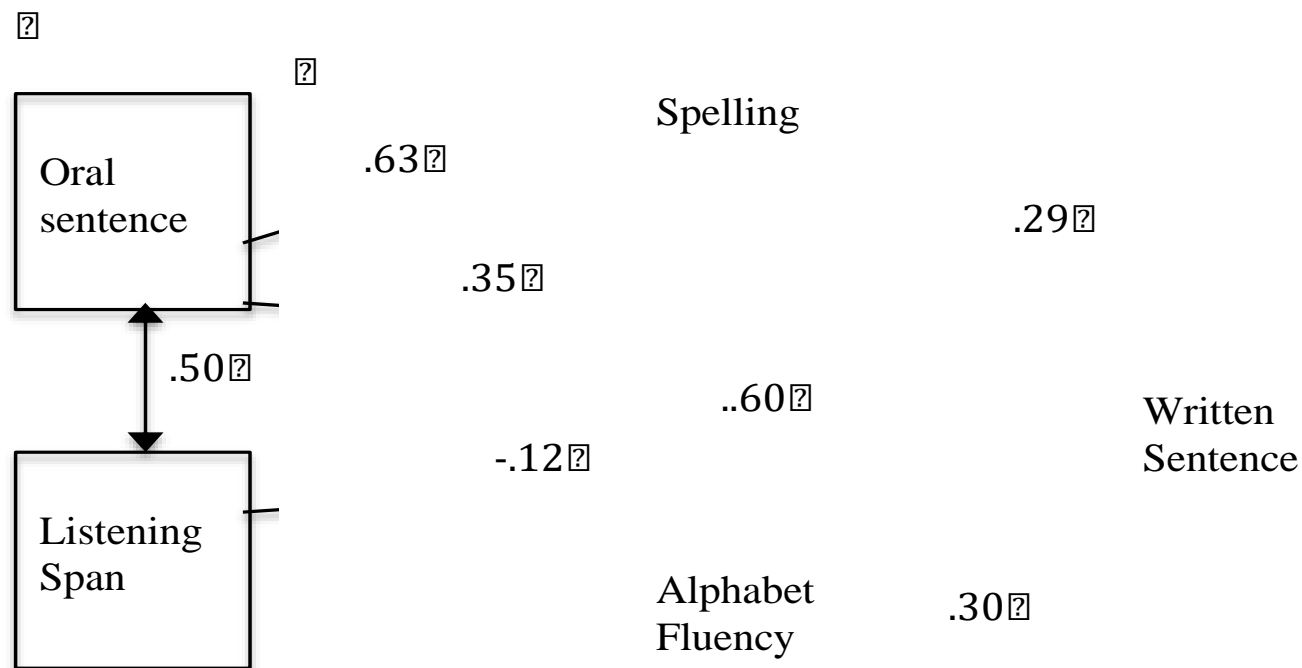



Impacts directly and indirectly on
academic performance

Exploring oral language and the quality of written texts: Year 2



Exploring oral language and elements of text production: Year 5



Learning and Instruction
Volume 60, April 2019, Pages 75-84

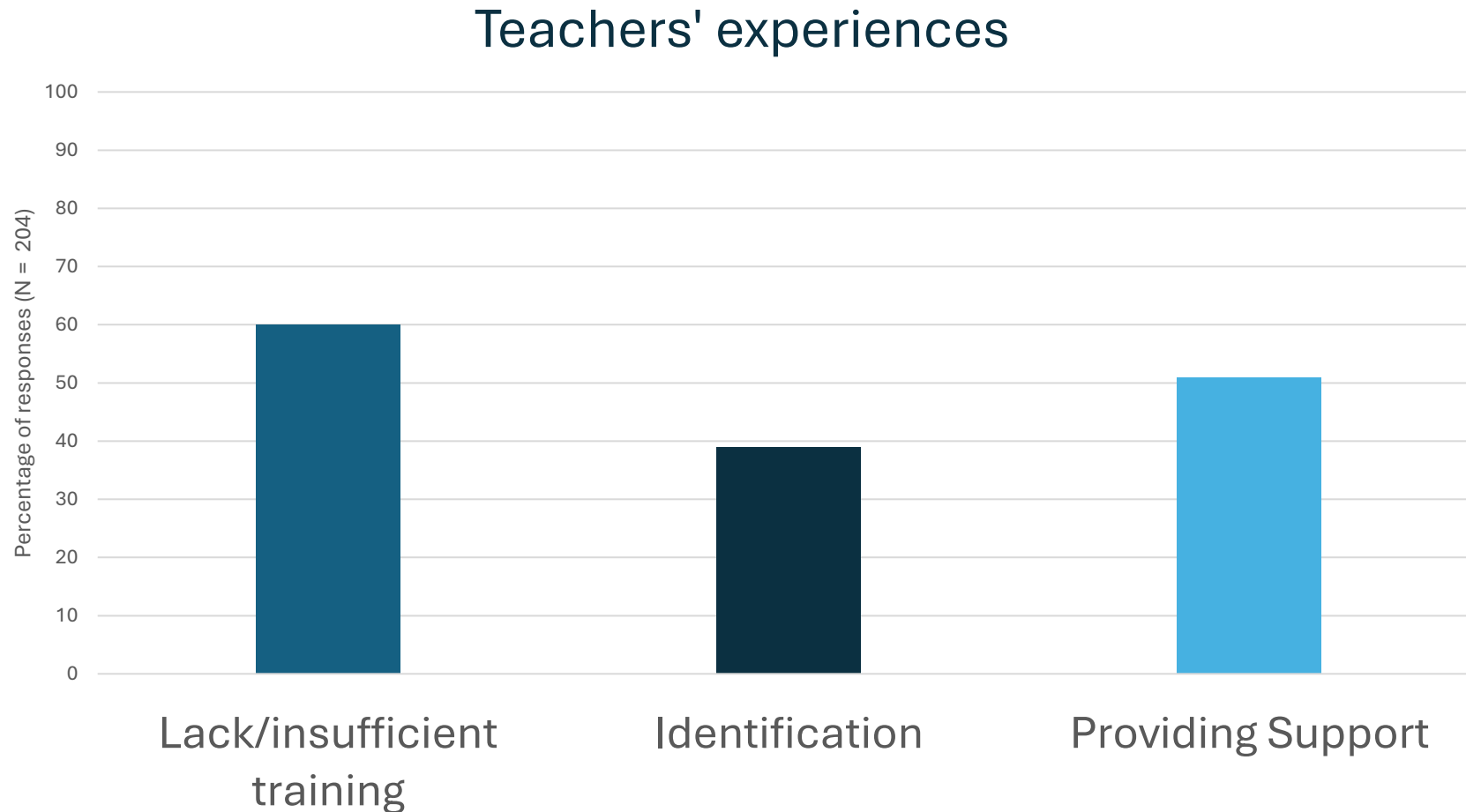


Struggling writers in elementary school:
Capturing drivers of performance

Julie E. Dockrell ^a, Vincent Connelly ^b, Barbara Arfe ^c

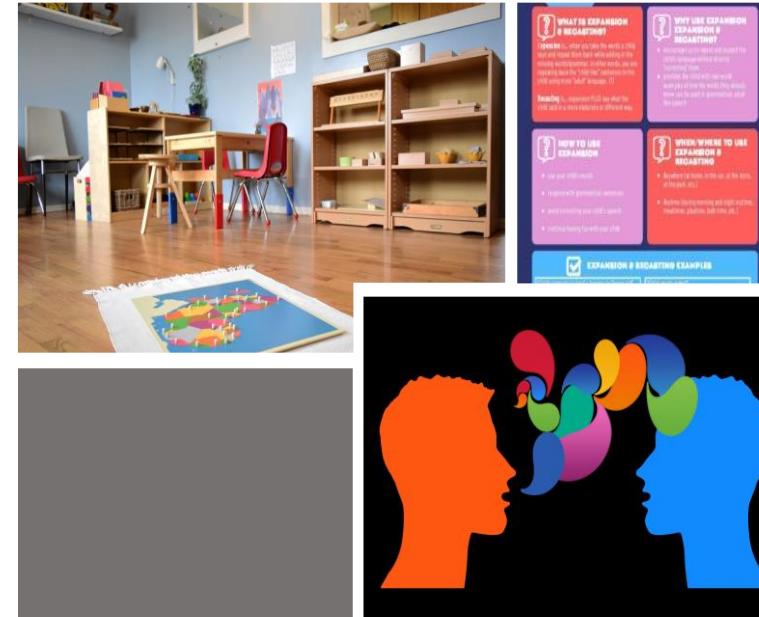
Many teachers continue to lack the necessary knowledge and competencies

Teachers face challenges in relation to oracy (Dockrell et al., 2015)



Drivers of oral language

- “Language nutrition” an environment with sufficient language exposure to facilitate, or nourish, a child’s brain (Weldon, 2014).
- Early language exposure that is rich in both quantity and quality (data driven/providing Justice, Jiang, & Strasser, 2018)
- Talking, interacting, or reading with a child – serve and return
- Rich environment
- The ways in which adults talk with children
- Long-term associations between a supportive preschool classroom language environment and children’s language and reading skills in kindergarten and fourth-grade (Dickinson & Porche, 2011).



Unpacking language Nutrition – a theoretical framework (Hadley et al. 2022)



Bridge Language

Literal talk
Vocabulary talk
Management talk
Questions and elicitations
High level questions
Responsive talk



Emergent Language

Conceptual talk
Vocabulary talk
Linguistic features
Word types and tokens
Syntax
Modelling

Effective for which children, in which contexts and at what point in development ?

Language nutrition in UK settings?



Communication friendly versus communication supporting

Communication Friendly Classroom

- 1 Light & Space
- 2 Using visual support – signage
- 3 Noise levels are managed
- 4 Clear routines
- 5 Adults listen and talk with children

Communication Supporting Classroom

- 1 Organised so that the environment affords high quality learning experiences.
- 2 Children have regular and structured opportunities to develop their language
- 3 Adults talk with children in ways which enhance receptive and expressive language skills
- 4 Emphasis on social interaction as a route to language,
- 5 Adults fine-tunes their verbal input to scaffold the child's communication

Quality First communication support

- Language learning environments are environments in which children are exposed deliberately and recurrently to:
 - High-quality verbal input among peers and adults and
 - Adult-child verbal interactions characterised by high levels of adult responsiveness (Justice, 2004)
- Richer early language and communication environments
 - associated with more favourable school readiness in
 - literacy and social adjustment,
 - language development and social development,
 - decoding skills in the middle years of primary school (Gibson et al 2020)
- Captured by 5 key elements
 - Exposure
 - Deliberateness
 - Recurrence
 - High-quality input
 - Adult responsiveness



Communication supporting classroom tool (CSCOT)


- **Language learning environments**
 - Elements identified as necessary prerequisites to allow teaching and learning e.g. Labelling in classrooms, quiet corners
- **Language learning opportunities**
 - The “What” of learning e.g. Small group work
- **Language learning interactions**
 - The “How” of learning e.g. the ways in which staff talk with children

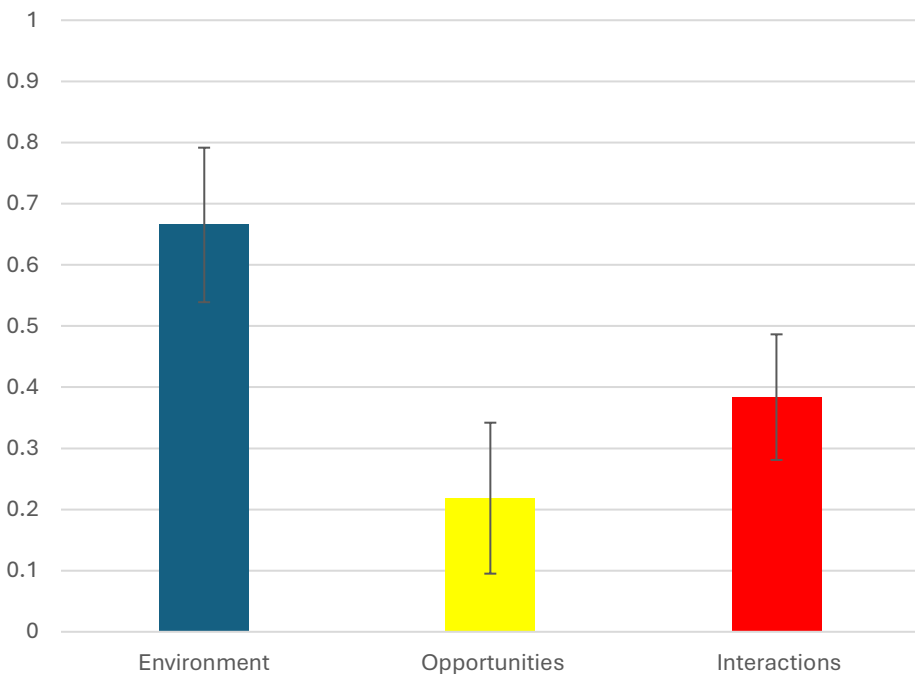


Article



The quality of universal language supporting provision in maintained nursery classrooms in economically disadvantaged areas of England: Identifying strengths and areas for development

Keeley Dobinson ¹, Sandra Mathers², Claire Forrest³, Jenna Charlton⁴, and Julie Dockrell⁵



Article

Capturing communication supporting classrooms: The development of a tool and feasibility study

Julie E Dockrell¹, Ioanna Bakopoulou², James Law³, Sarah Spencer⁴, and Geoff Lindsay⁵

Communication supporting classroom tool (CSCOT)
Captured:
Language learning environment
Elements identified in the research evidence as necessary prerequisites to allow teaching and learning e.g. quiet corners, labelling, books
Language learning opportunities *e.g. small group work, interactive book reading*
Language learning interactions
The how of teaching – evidence of effective ways in which teachers talk with children – from using their names to recasting and scaffolding

Key messages:

1. Oracy skills are associated with and underpin literacy the message is not new
But context differentially challenging?
2. Oral language is a complex skill
3. Teachers are not well prepared to
 1. Meet children's language learning needs
 2. Identify language problems
4. Interventions need to target universal settings at risk and develop language nutrition
5. Teachers can create strong language learning environments
6. Interventions should capture teacher and child level variables



Mind the Gap: Between
what we know and what we
do



The curriculum review: a beacon of
light or another missed opportunity?

Oral language is not a curriculum topic in its own right but a core skill that enhances learning, provides access to the curriculum and supports learners.

Given its significant role in underpinning learning, it should not be considered an extracurricular activity.

The challenges are

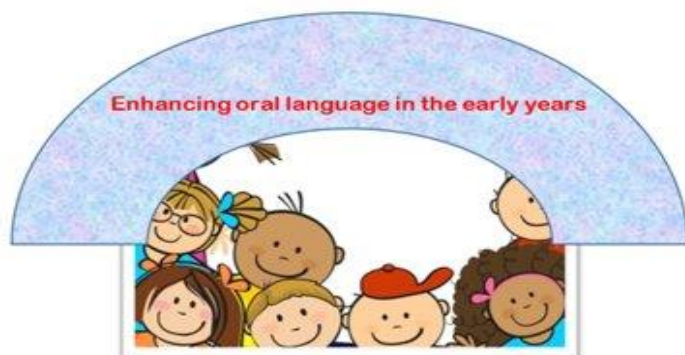
How oral language should be embedded across the curriculum at different developmental phases

Enhancing knowledge and skills so teachers can support ALL learners

Missed opportunity

- The Curriculum and Assessment Review's Interim Report just released yesterday, but in a baffling omission it does not mention oracy, or speaking and listening.
- Identifies communication skills as a key priority for parents.





Thank you for your time

Collaborators: Sandra Mathers, Claire Forest,
Keeley Dobinson, Emma Sumner, Jenna Charlton, Liz
Hewitt, Geoff Lindsay, Ioanna Bakapoulou & Juhanya
Taha
James Law



REFERENCES you might not know:

Raph, J. B. (1965). Chapter II: Language Development in Socially Disadvantaged Children. *Review of Educational Research*, 35(5), 389-400. <https://doi.org/10.3102/00346543035005389>,.

Heffernan H. (1950). Readiness For Oral And Written Language. *Elementary English*, 27(4), 247–253.
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Netzer, R.F. (1937) The Evaluation of a Technique for Measuring Improvement in Oral Composition, *The Journal of Experimental Education*, 6:1, 35-39, DOI: 10.1080/00220973.1937.11010074

Ruddell, R. B. (1966). Oral Language Skills and the Development of Other Language Skills. *Elementary English*, 43(5), 489–517.
<http://www.jstor.org/stable/41386030>



UNIVERSITY OF AMSTERDAM

Faculty of Social and Behavioural Sciences

British Academy, Mind the gap

DLD and literacy

Elise de Bree, March 2025

Navigating a complex world

Europe



Language is essential in the educational setting

Importance of oral language and oracy

Challenges in mainstream education

Opportunities in mainstream education



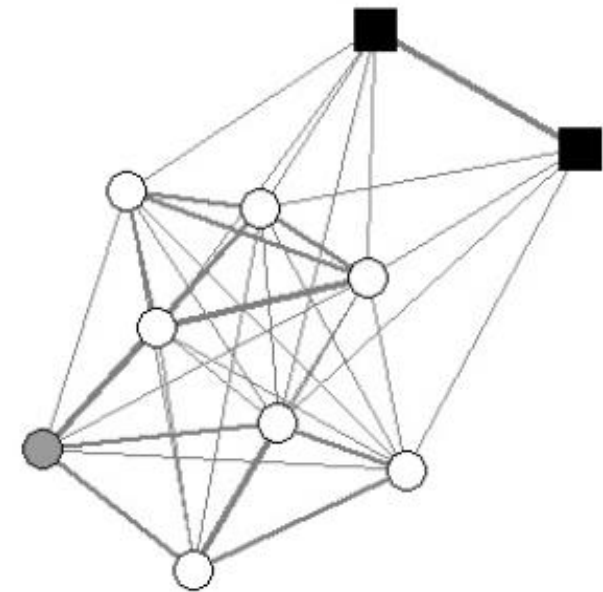
Language is essential in the educational setting

Importance of oral language and oracy

Challenges in mainstream education

Opportunities in mainstream education

classroom 221207066



Chen et al., (2020)



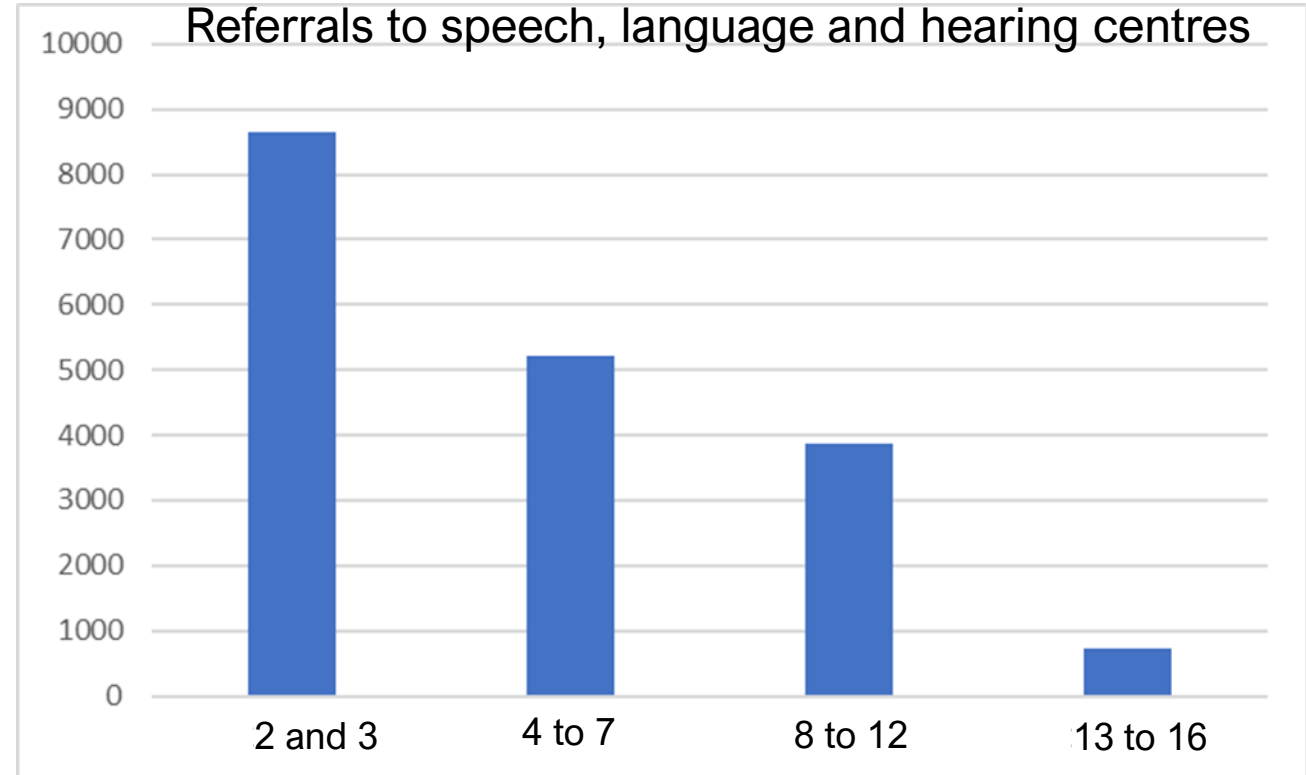
DLD SEN TD

Language is essential in the educational setting

Importance of oral language and oracy

Challenges in mainstream education

Opportunities in mainstream education



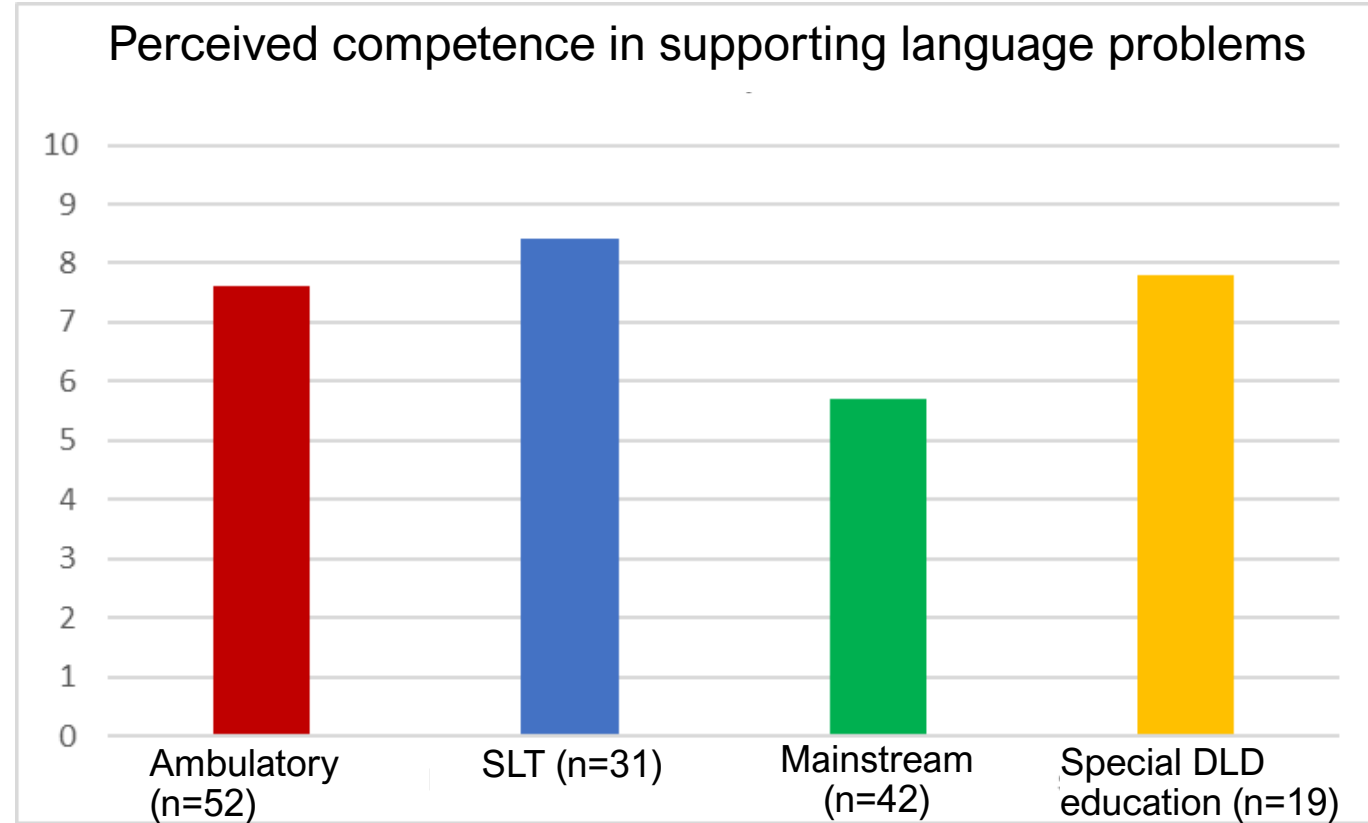
de Bree, Wiefferink & Gerrits (2024)

Language is essential in the educational setting

Importance of oral language and oracy

Challenges in mainstream education

Opportunities in mainstream education



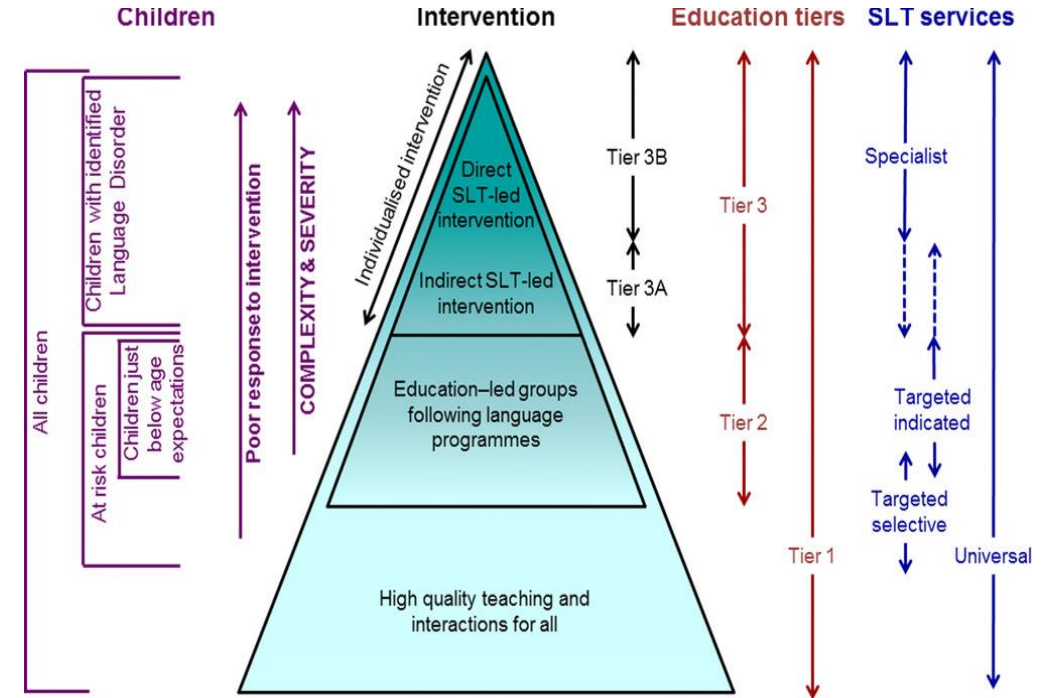
de Bree & van den Boer (2024)

Language is essential in the educational setting

Importance of oral language and oracy

Challenges in mainstream education

Opportunities in mainstream education



Ebbels et al., (2019)

Language is essential in the educational setting

Importance of oral language and oracy

Challenges in mainstream education

Opportunities in mainstream education



Bouwstenen voor effectieve taaltrajecten

Praktijkgids voor taalondersteuning in
het kleuter-, lager en secundair onderwijs

Astrid Geudens, Kirsten Schraeyen, Helena Taelman, Marit Trioen, Jordi Casteleyn, Mathia Simons, Tom F.H. Smits

Universiteit
Antwerpen

Odisee
DE OPGEDRAGENSCHOOL

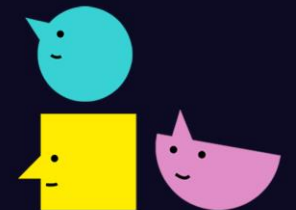
THOMAS
MORE

—Geudens et al. (2021)



West et al., (2021; 2024)
Esposito et al., (2024)

Speech and Language UK



DLD in the educational setting

Meeting educational needs is essential

Challenges of

- shared service provision (e.g., ICAN & RCSLT, 2018)
- inclusive education

DLD in the educational setting

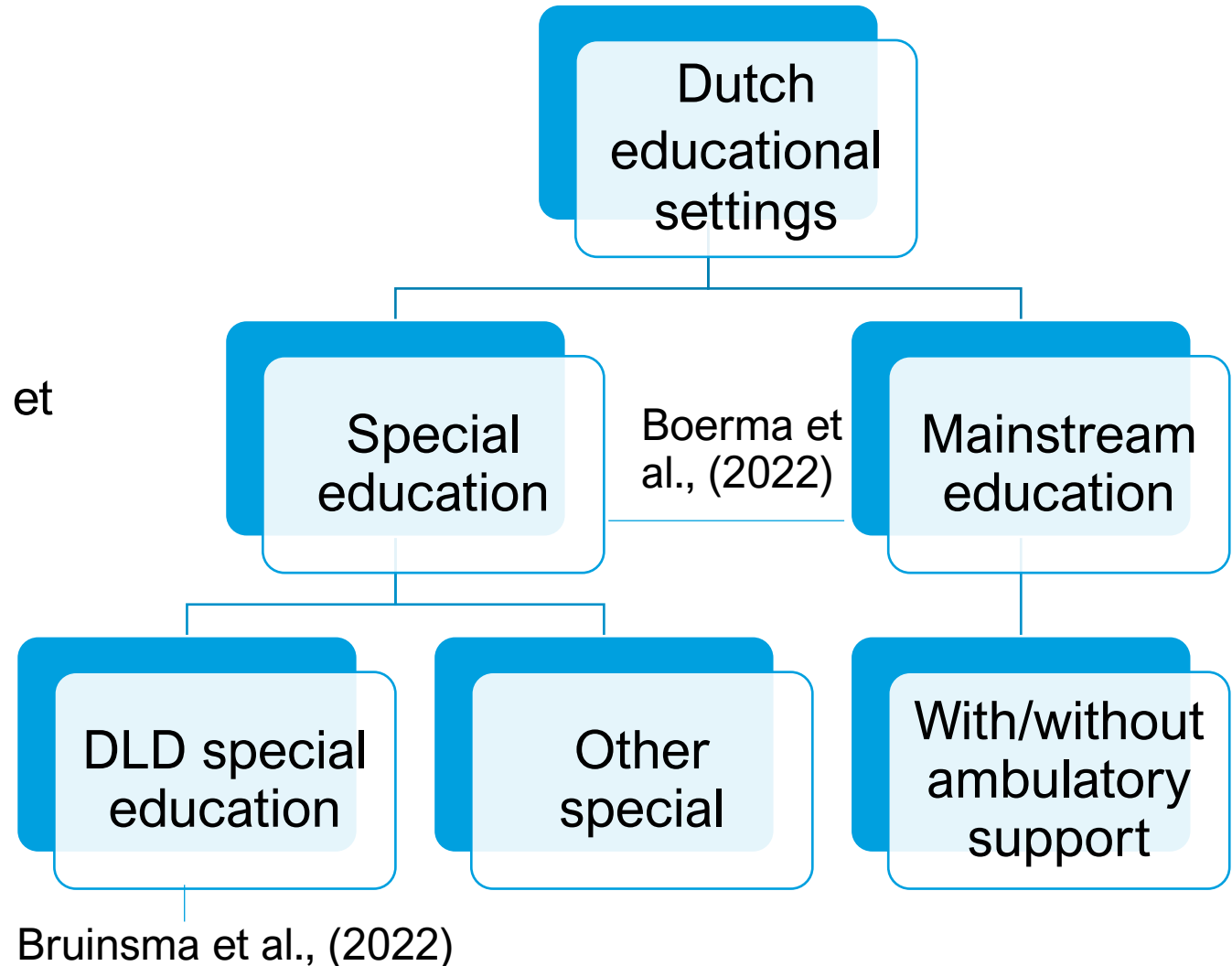
Meeting educational needs is essential

Challenges of

- shared service provision (e.g., ICAN & RCSLT, 2018; de Bree & van den Boer, 2024)
- inclusive education (de Bree, Keydeniers et al., 2024)

Heterogeneity of

- language profiles
- co-occurring needs → literacy



DLD and literacy

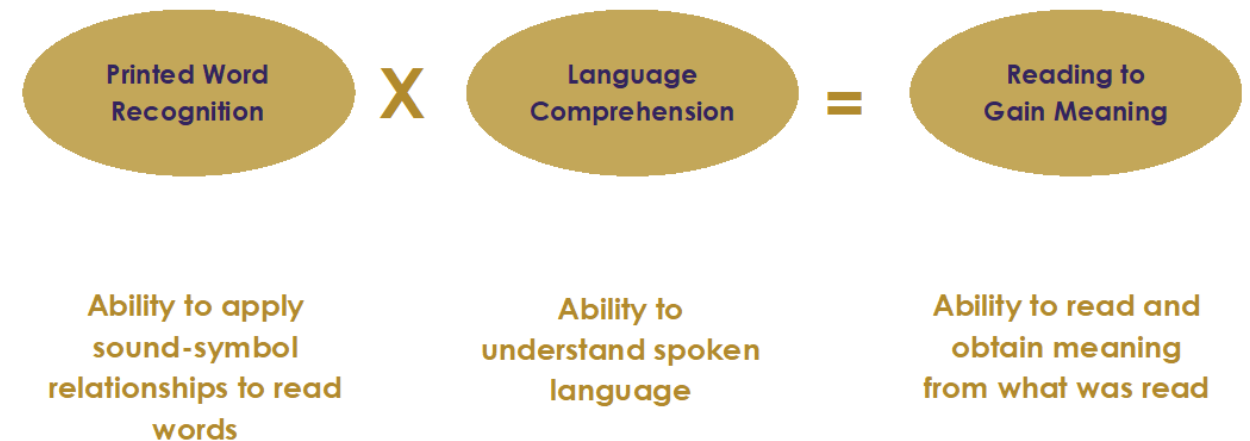
Literacy seems crucial for education setting
(Morgan et al., 2023; Samson & Lesaux, 2009)

Many children with DLD have word-level literacy difficulties

- Reading (e.g., Bishop et al., 2009; Ramus et al., 2013; Snowling et al., 2021)
- Spelling (Graham et al., 2020; Joye et al., 2019)

Double risk of reading comprehension difficulties for children with DLD

The Simple View of Reading



Gough and Tunmer 1986; Hoover and Gough 1990

DLD and word-level literacy: some questions and issues

Why considerable co-occurrence of DLD –
RD/dyslexia?

Spelling difficulties = due to DLD and/or reading?

How to diagnose dyslexia in children with DLD?

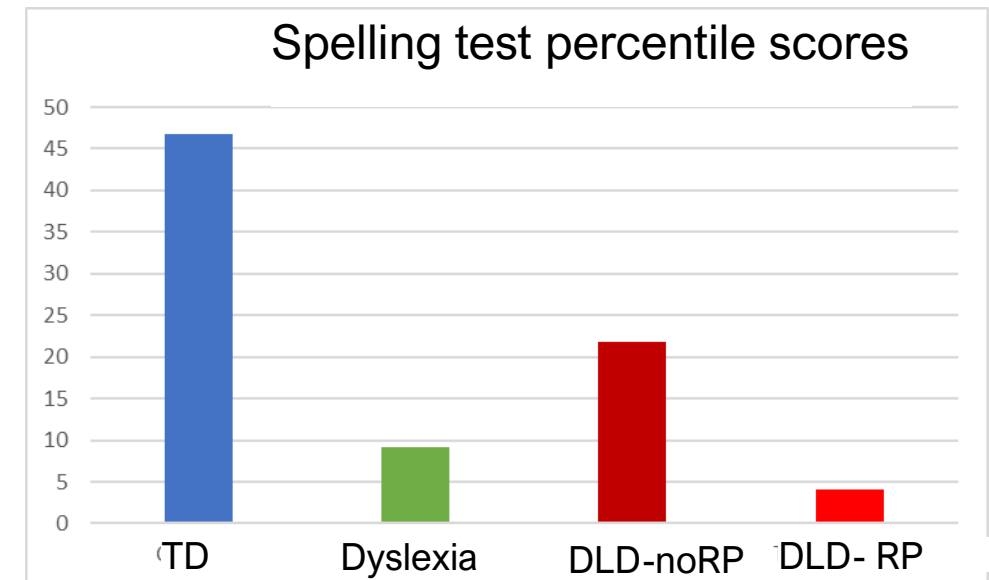
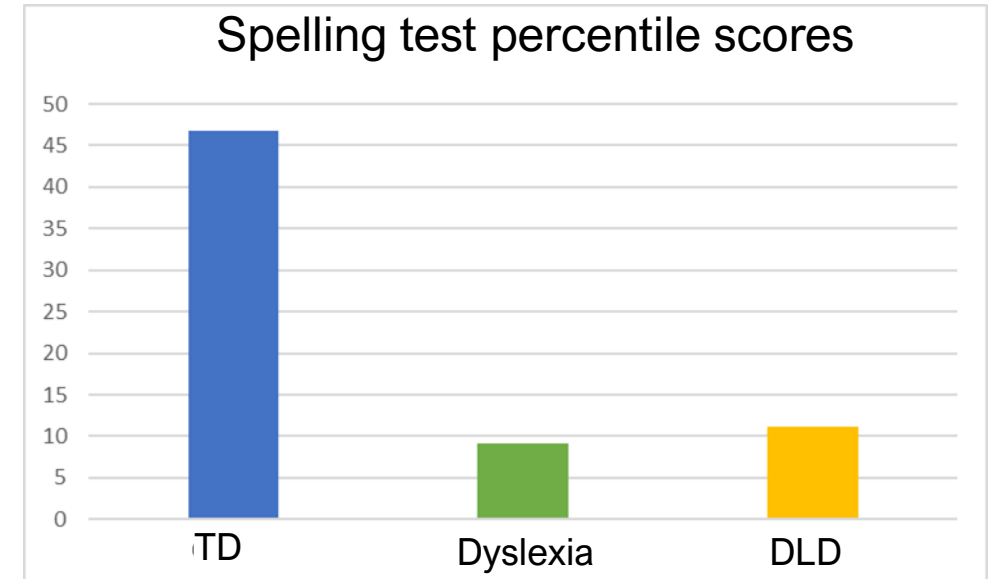
Is a specialized dyslexia intervention effective for
children with DLD+dyslexia?



DLD and word-level literacy: spelling

Spelling outcomes and DLD

- Average: DLD < TD
- Spelling related to word reading rather than oral language (Joye et al., 2019; Blikendaal et al., 2024; de Bree et al., 2022)



DLD and word-level literacy: mono- and multilingual children

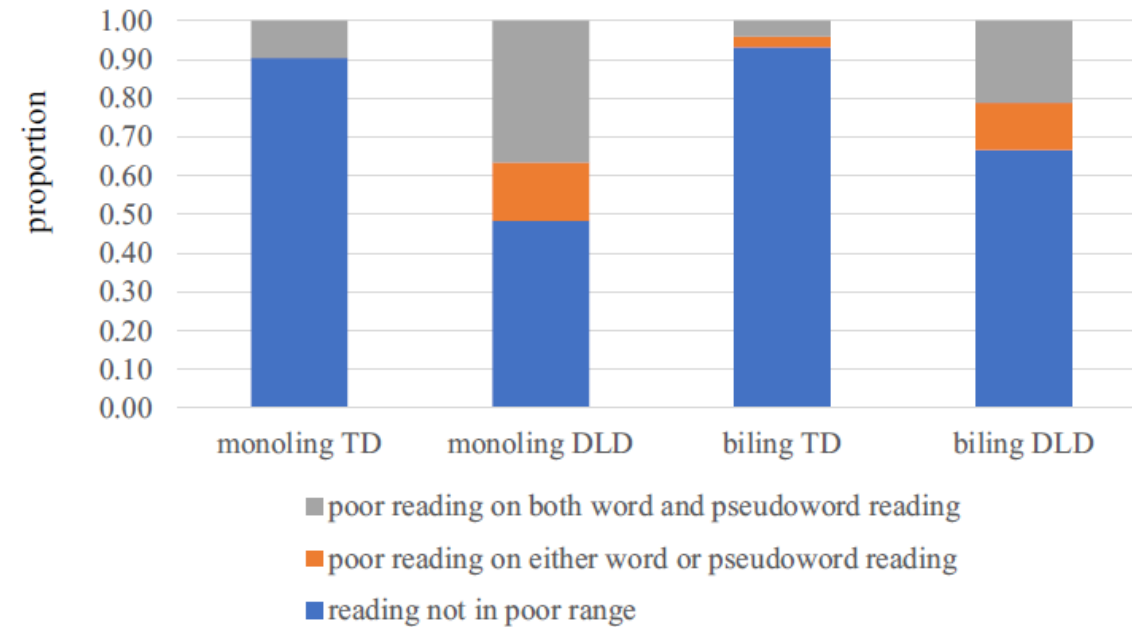
(Balilah & Archibald, 2018; de Bree et al., 2022, 2025)

Oral language in mainstream language:

- Monolingual DLD > bilingual DLD

Word-level literacy

- DLD < TD
- Monolingual = / < bilingual



de Bree et al. (2022)

DLD and word-level literacy: influence of additional SSD

SSD is (additional) risk factor (Walquist-Sørli et al., 2024)

- limited nr of studies so far
- project Literacy after early language intervention (Duinmeijer et al., in prep)

Practical issues: measuring word reading in children with SSD?



DLD and word-level literacy: specialized dyslexia intervention

Project ABC for DLD (Verwimp, Tijms, Hakvoort & de Bree, in progress)

1. Comparison within DLD group in special education

- DLD+RD, no specialized intervention and bau at special education
- DLD+dyslexia diagnosis, receiving specialized intervention

2. Comparison with other groups with dyslexia receiving specialized intervention (Tijms, 2005, 2011)

- DLD+dyslexia, special education
- Dyslexia-only
- ADHD+dyslexia, special education



Take home

Language and literacy are essential

- Need for attention to oral language in the educational curriculum

Children with DLD face challenges with both
→ they deserve sustained integrated support

Need for evidence base in shaping educational support for children with DLD (Kulkarni et al., 2022)



Thank you!



e.h.debree@uva.nl



Main points of the day

ATLAS group

