



RAISING AWARENESS OF DEVELOPMENTAL LANGUAGE DISORDER CASE STUDIES

Hannah (AGE 15)

From her pre-school years, Hannah was different. She didn't conform and was often labelled by teachers as naughty. In comparison to her siblings, Hannah needed to be parented in a different way including being presented with very little or no choice to avoid her from feeling overwhelmed. The language used had to be simple and if Hannah couldn't make herself understood, she was left very frustrated.

Within weeks of her starting school, Hannah's teacher approached her parents to suggest Hannah receive assessment. This led to one to one support but they realised it was not going to be enough. Hannah is really bright and they knew she would need specialist, long term help to ensure her difficulties did not affect her happiness and confidence at school. They were able to secure an evaluation from the Local Authority Educational Psychologist who provided a two page report. This was simply not adequate to secure the help Hannah needed.

Hannah's parents were able to secure a private Educational Psychologist and the result highlighted the level of the complexity of her difficulties caused by a speech and language problem that had not been understood. Up until this point, the focus had been on Hannah's severe dyslexia, dyspraxia and on her behavioural problems which were a manifestation of the frustration of not being understood.

Having been diagnosed, Hannah's parents went onto fight for Hannah to get the right help and specialist teaching. Their emotional and financial commitment to challenge what was being offered by the Local Authority caused significant stress and resulted in debt. It was worth it when they heard they had won the appeal for Hannah to attend Moon Hall a specialist school for children with dyslexia with the right kind of teaching for Hannah combined with Occupational Therapy and Speech and Language Therapy.

Within a few months of attending Moon Hall, Hannah was so much happier. She learnt techniques to cope with her frustrations and ways of being understood while at the same time. She began expressing herself more clearly and taking time to listen, rather than talk over people. Most importantly, Hannah has learnt to cope in social situations outside the home, ask for things in shops, and has developed the confidence to stand up and talk in front of others at school. To her parents delight, Hannah went onto apply and be successful in becoming Head Girl at Moon Hall.

Today, Hannah can articulate and argue her point, she reads and comprehends complex books. In the past she used to hide under the table due to frustration at school and to avoid failure, while now she loves school, has great friends and spends a lot of her own time reading and learning. She is happy at school and home.

Vicki, Hannah's mum says

"We never thought that Hannah would ever be as confident as she is today. I remember every single day of Hannah hiding under the table rather than deal with feeling like she was failing at school. Her difficulties held her back from being able to communicate and understand what was being said which made it a nightmare for her. Having been diagnosed with DLD, Hannah was able to get specialist help which transformed her communication skills. She has recently been made a Head Girl at her school and is blossoming into the person she ought to be due primarily to her having the right educational support as well as home support."

Hannah says

"I have loved Moon Hall School and especially that I was able to study with others with similar problems. I used to get so cross - I always wanted to read and learn. I am doing GCSE's and my teachers understand how I learn."



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Harry (AGE 21)

Harry was doing well in Reception and Year 1 of school, but when he reached Year 2 things started to change. Harry was a popular child and enjoyed playing with his friends in the playground, drawing and building things. However, his teachers noticed that he was having difficulties understanding lessons and he was struggling with learning to read. Harry's parents became concerned because he seemed to be getting frustrated at school and his home life was becoming strained.

The school suggested an Educational Psychologist assessment which led to identification of language difficulties and a recommendation for Speech and Language Therapy. Harry started working with a Speech and Language Therapist (SLT) when he was 7 years old. The SLT helped Harry learn concepts like the days of the week, words for understanding his Maths lessons and strategies for explaining things.

However, Harry continued to have difficulties reading his work in class and his homework at home and Harry was becoming unhappy at school. At 10 years old, Harry moved to a school for students with dyslexia where teachers adapted their teaching methods to help him. Harry did well and discovered that he was bright with many talents including Art and Drama. Harry went on to take lead parts in school performances and joined a local drama group. Ongoing support from a Speech and Language Therapist helped Harry understand his DLD and develop skills and strategies for learning.

Harry went on to college and studied Public service, Business Studies, Media and IT. In his GCSEs and B-TECs, his grades included Distinctions, Merits, Bs and Cs. He is thrilled to be starting an Outside Broadcast degree at University this year.

Harry says

"I remember feeling frustrated, misunderstood and sometimes alone when others were doing better than me at school. I often felt different to others in my year which contributed to me feeling 'Outcasted'. This is why it is so important teachers and parents know more about DLD so that other children don't go through what I went through.

It is scary knowing that DLD is very hard to notice at a young age which is often why people have no idea why a child is acting and behaving in a different way. It is a real knock on your confidence when you struggle while your friends sail through their work and tests. I am lucky to have been diagnosed with DLD at a young age while others still don't know they have this learning difficulty. When I had specialist support from a SLT it was such a relief to know there wasn't something 'wrong' with me. Those with DLD are great in a unique way, they just need a different approach to learning. I've made it into University so I am proof!

On a daily basis I have a laugh and enjoy myself with my friends and family. I have nothing to hide, I've got DLD and even though there are times others will understand things a lot better than I will. With the support of an SLT since I was seven, I know I am lucky. Life is great, challenging but great. I can live a normal life and do things in my own unique way and still get the same outcome that any other person who doesn't have DLD could achieve."



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Sophie (AGE 37)

Now 37, Sophie had speech and language problems identified when she was three years old with her parents concerned about her understanding of words and speech. They sought help for a situation that some people blamed on Sophie's parents not communicating with Sophie, a hurtful accusation when Sophie was in a very nurturing, supportive family environment.

Despite other people not believing them, Sophie's parents knew Sophie had difficulties that needed recognition in order for her to receive specialist help. They battled to have Sophie diagnosed with speech and language problems and for her to receive intensive speech and language therapy, as well as attend a specialist school. The support she had there made a dramatic difference to Sophie's development, including her reading and writing skills.

On leaving school, Sophie trained as an early years practitioner and today works at a day nursery supporting children with complex needs. She is very talented at her job and has good relationships with children and colleagues. Happily, the role builds on Sophie's personal and professional strengths.

But, Sophie's language difficulties mean that sometimes it can be hard to follow meetings, to have the confidence to ask what people mean and explain things. This led Sophie a few years ago to pluck up courage to tell her managers and colleagues that she had Developmental Language Disorder (DLD). This required Sophie to explain how DLD can affect her everyday – and while people have been supportive, she worries they still do not really understand what it is.

Sophie says

"I was diagnosed with DLD when I was young. I've had great support from my parents, and specialist schooling and support including from speech and language therapists, so I have been able to succeed in more than I would ever expect."

"It is always there in my life, and something I have to find strategies to get by. I wish I could do things that other people could do, and take things in and remember things when told the first time. My friends are really supportive but I wish that people had more knowledge about DLD [developmental language disorder] and there was more support. It's a hidden condition, and people need to know about it. [Having DLD] does get me down. It causes me to have anxiety and low self esteem."

SEE BELOW FOR FACT SHEET



DEVELOPMENTAL LANGUAGE DISORDER (DLD): Fact sheet

DLD 1-2-3: Three things you need to know about DLD

DLD 1: Developmental Language Disorder is when a child or adult has difficulties talking and/or understanding language.

DLD 2: DLD is a hidden disability that affects approximately two children in every classroom, affecting literacy, learning, friendships and emotional well-being.

DLD 3: Support from professionals, including speech and language therapists and teachers, can make a real difference.

DLD: Diagnostic terminology, frequency, causes

- **DLD: 2017 brings consensus on terminology.** The recommendation for the use of the diagnostic term Developmental Language Disorder is now published (Bishop et al., 2016; 2017), with an account of how consensus was reached.
- **Frequency:** DLD affects approximately two children in every classroom. A recent epidemiological study in the UK, the SCALES study (Norbury et al. 2016), found that 7.5% of children had DLD with no associated biomedical condition.
- **Causes:** DLD tends to run in families. Twin studies indicate strong genetic influence on DLD, but this seems to reflect the combined impact of many genes, rather than a specific mutation (Bishop, 2006). The popular view that DLD is caused by parents who don't talk to their children has no empirical support.
- **Neurobiology:** There is no evidence of **any** brain damage in vast majority of cases; there may be subtle differences in size of different brain regions and proportions of grey matter, but this is inconsistent from child to child. As yet we have no 'biomarker' for DLD (Leonard et al, 2006)

DLD: Associated difficulties

- **Relationship to other conditions:** DLD commonly occurs with ADHD and dyslexia. There has been much debate about overlaps with mild autism (Bishop, 2008). Many children do not have the social problems characteristic of autism, but some have mild autistic features. There is, however, a marked difference in the help available for children with a diagnosis of autism vs DLD. This difference persists into adulthood, where both dyslexia and autism are recognised disabilities, whereas there is very little awareness of DLD.
- **Literacy and academic attainment:** Close links exist between DLD and dyslexia (Bishop and Snowling 2004) Many children with DLD meet criteria for dyslexia (McArthur et al, 2000). Even if the child can read aloud accurately, there are often problems with understanding of what is read (Stothard et al, 2010). These problems are frequently overlooked, and failure to comprehend can be misinterpreted by teachers as naughtiness or inattention. Teachers are not taught about DLD in their training.



- **Social difficulties with peers:** Being able to express oneself fluently and to quickly grasp what others are saying can have a big impact on social relationships. The Manchester Language Study found that by 16 years of age, 40% of individuals with DLD had difficulties in their interaction with peers (St. Clair, Pickles, Durkin & Conti-Ramsden, 2011), 50% of 16 year olds recall being bullied in childhood (in comparison to less than 25% of typically-developing teenagers) and 13% have experienced persisting bullying since childhood. (Knox & Conti-Ramsden 2003). Better understanding of DLD by adults and peers could help avoid these negative outcomes.

DLD: Employment and Mental Health

- **Employment:** DLD needs to be taken seriously because it can increase the risk of unemployment and lack of independence in adulthood (Conti-Ramsden & Durkin, 2008). Nevertheless, those with milder problems often hold down jobs, but usually of a relatively unskilled nature (Whitehouse et al 2009).. Better recognition of DLD in schools would allow children's areas of skill to be developed and fostered, so they are not disregarded if they don't do well on conventional academic outcomes.
- **Mental Health:** Children with milder DLD show few difficulties. In contrast, approximately two thirds of children (64%) with persisting language disorder exhibit **some** externalizing behaviours (e.g. conduct problems: aggression 'fights with other children') and/or internalizing difficulties (e.g. withdrawal: solitary, tends to play alone) (Conti-Ramsden & Botting, 2004). Fortunately, these difficulties often resolve in adolescence (St. Clair et al., 2011), yet teenagers with DLD are two and half times more likely to report symptoms of depression than their typically developing peers (Conti-Ramsden & Botting, 2008). Most therapies for children's mental health problems are 'talking therapies' which may not be optimal for children with DLD.

DLD: Intervention

- **Intervention:** For interventions to be effective they must be of high quality and of sufficient duration - an increasing number of promising ones are being developed (Law et al 2015). Indeed robust controlled trials in schools have shown that interventions delivered by teaching assistants, who are trained and supported can bring about significant gains in Language (Fricke et al., 2013; 2017 and Literacy (Bowyer-Crane et al, 2008). Some children will need longer-term support for problems that are likely to persist despite intervention (Boyle et al, 2010). Research has found particular difficulties of intervening with children with receptive difficulties.

DLD: Public recognition and the RADLD campaign

- **History and terminology:** Children's language problems have been described for nearly 200 years (Gall 1822). 'Developmental aphasia' was the original term used, but subsequently many different terms have been used (specific language impairment, primary language difficulty) in research and practice (Dockrell, 2006). The term Developmental Language Disorder has been around for many years, but the new recommendations published in 2017 give clear guidelines about how it should be used, and explain why it is preferred over other terminology.
- **Need for improved public recognition of DLD.** There is poor public awareness of the condition, reflected also in low rates of research relative to the frequency and severity of DLD (Bishop, 2010). The RADLD (formerly RALLI) campaign has fought to increase awareness of basic facts about DLD via a YouTube channel and supporting materials.

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