

# LANGUAGE

## as a Missing Link & Missed Opportunity

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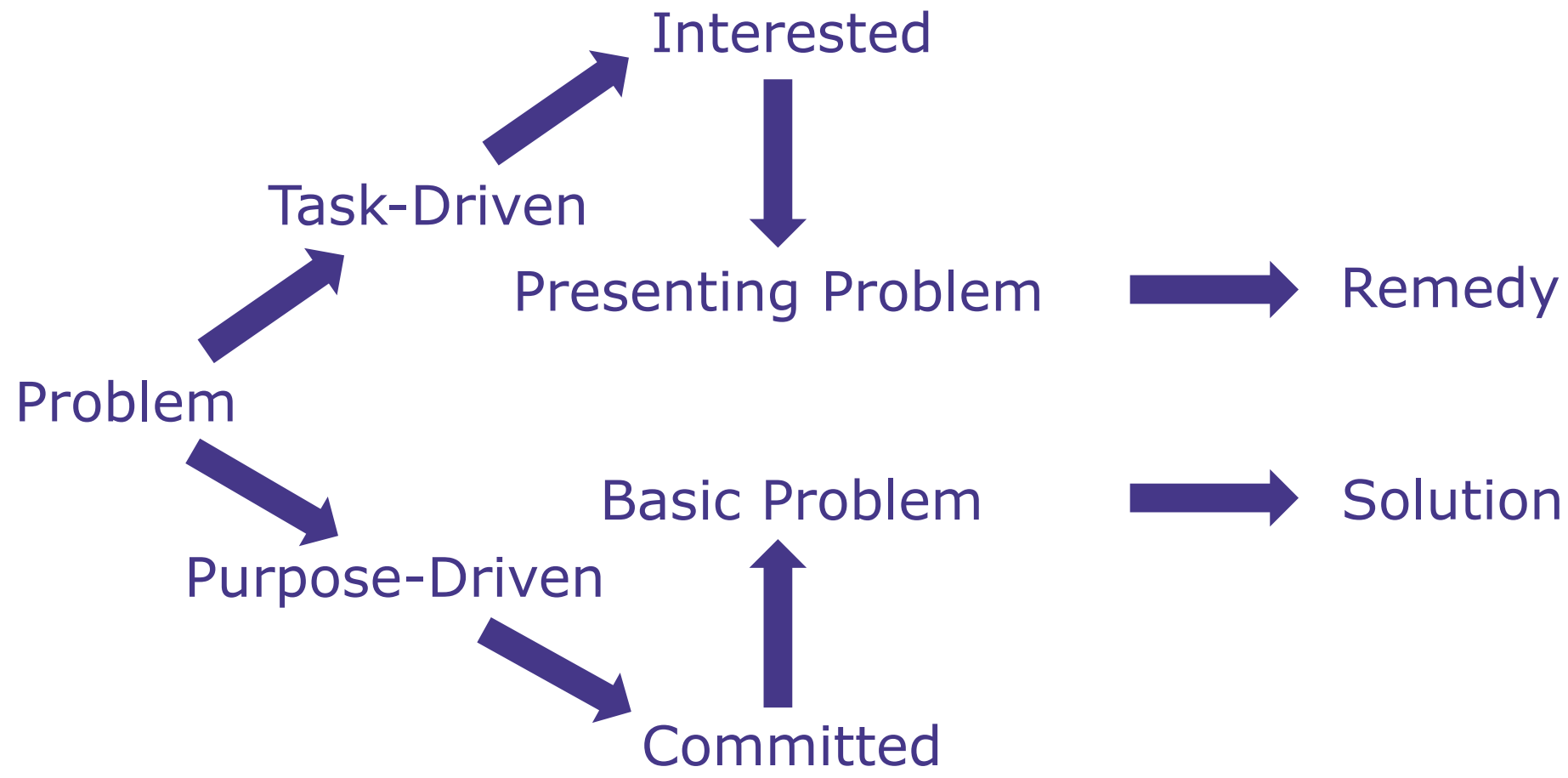


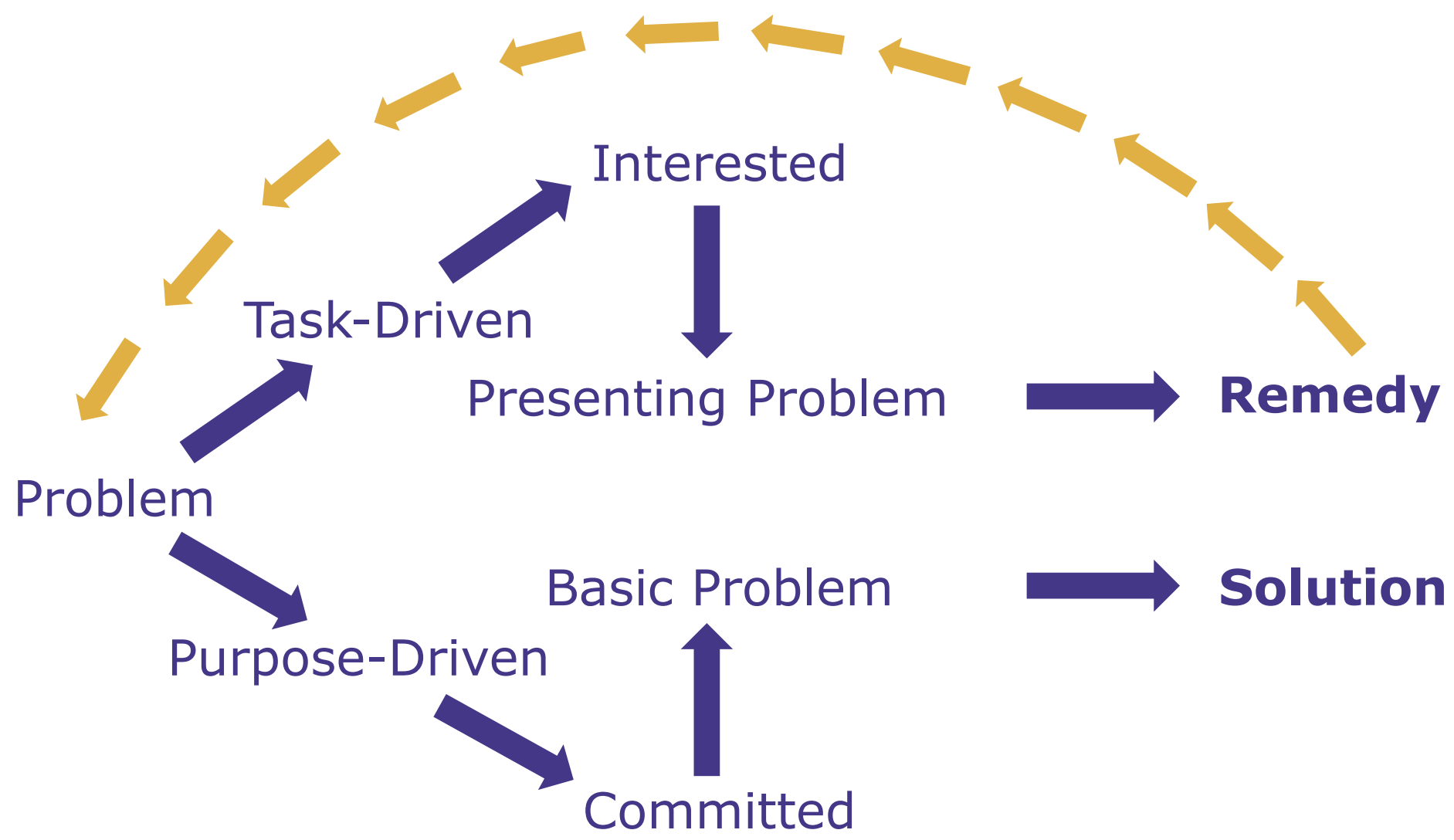


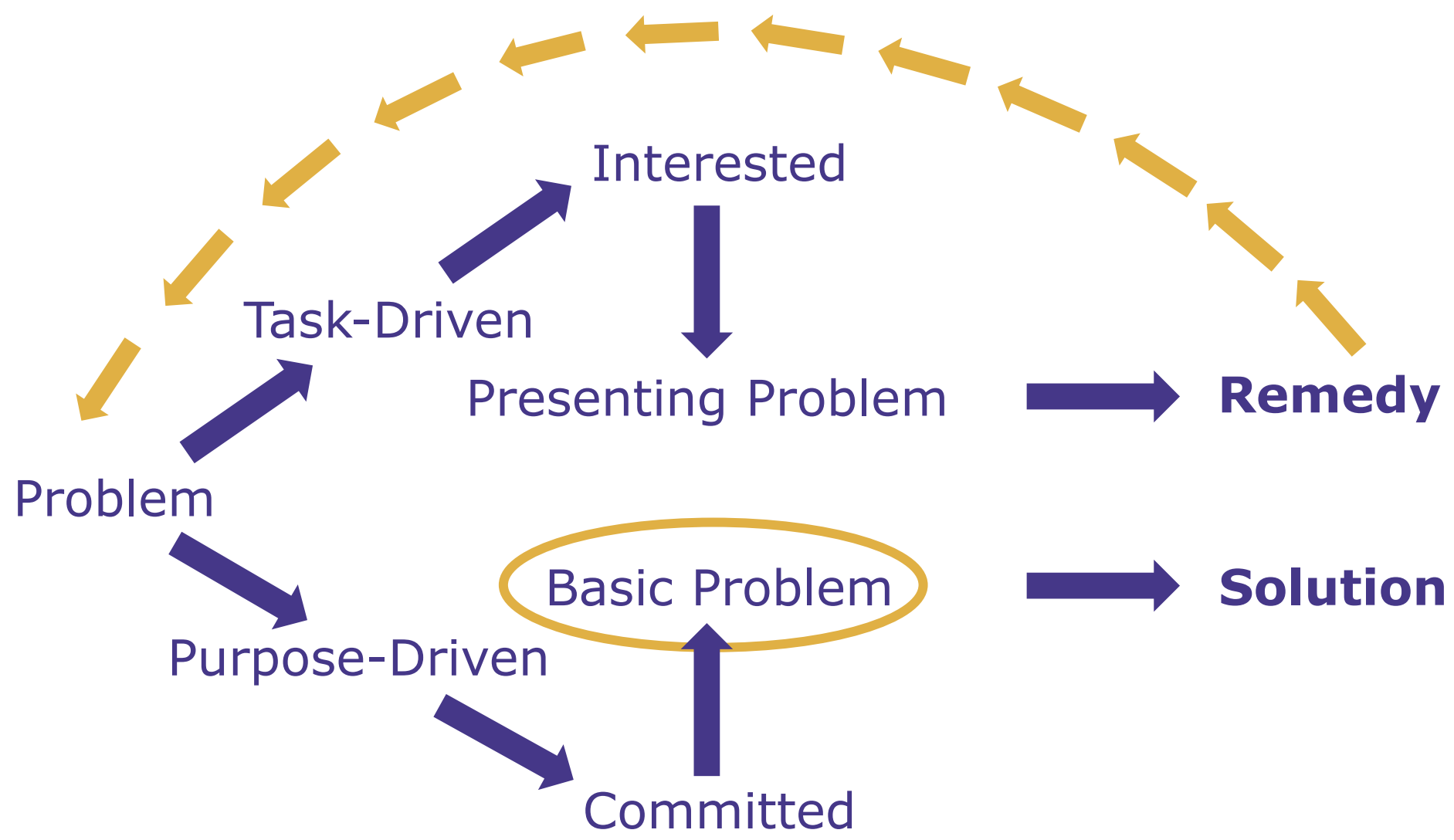
You never change things by fighting the existing reality.

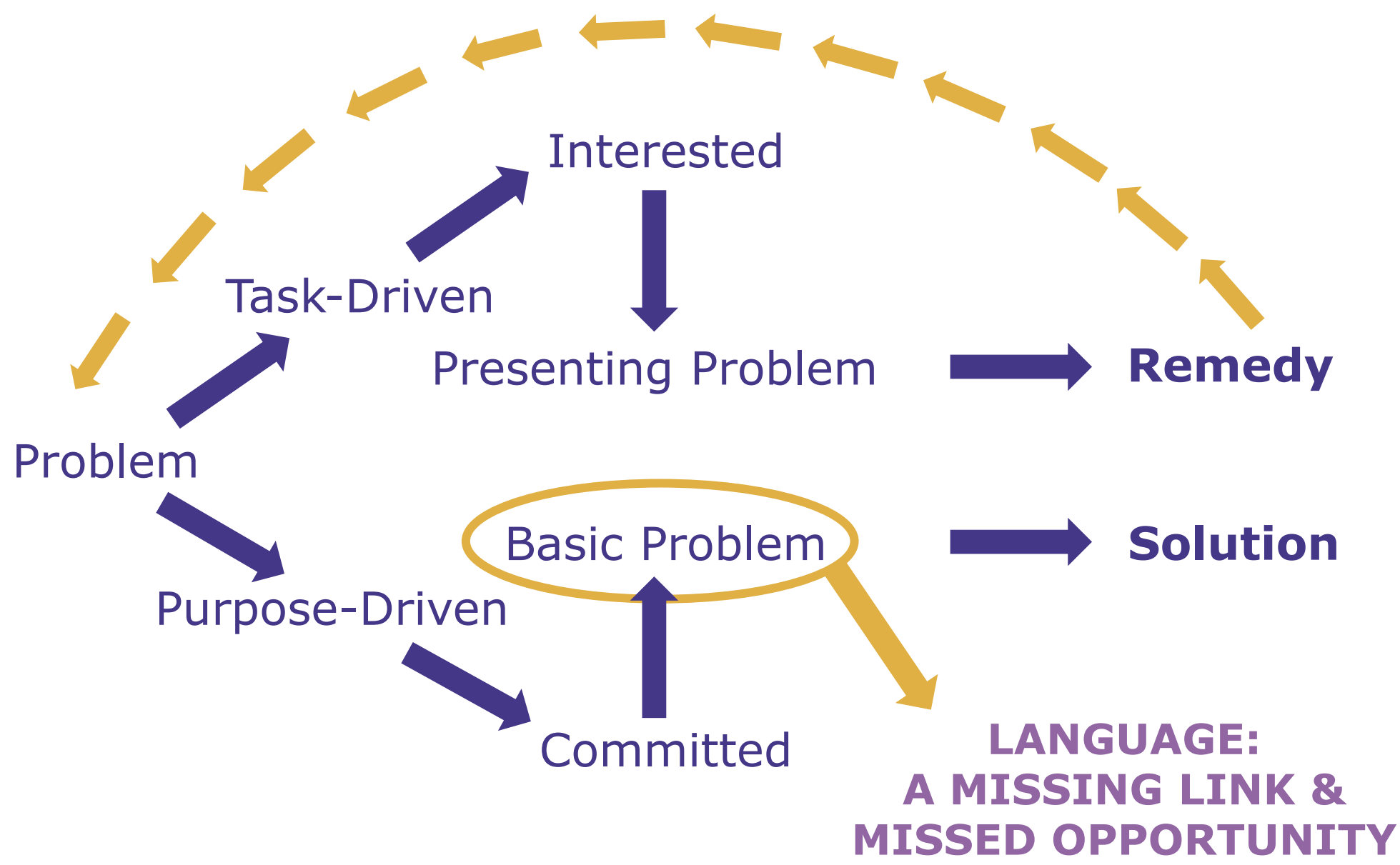
To change something, build a new system that makes the existing system obsolete.

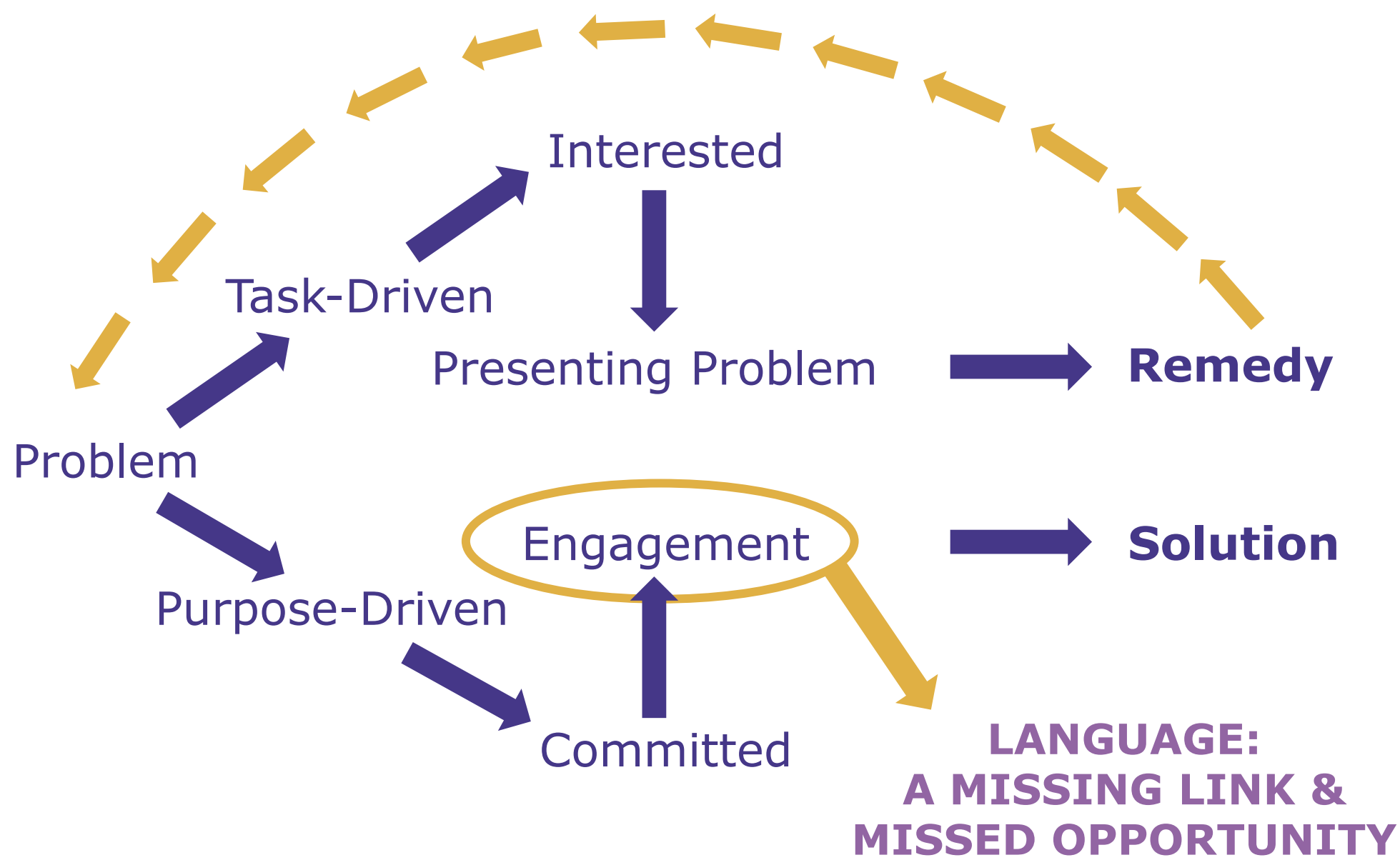
—Buckminster Fuller













In some cases, children and teens do not know how to appropriately channel their frustrations, **do not have the language** to express themselves or clearly understand what is going on around them, and act out in anger as a form of release.



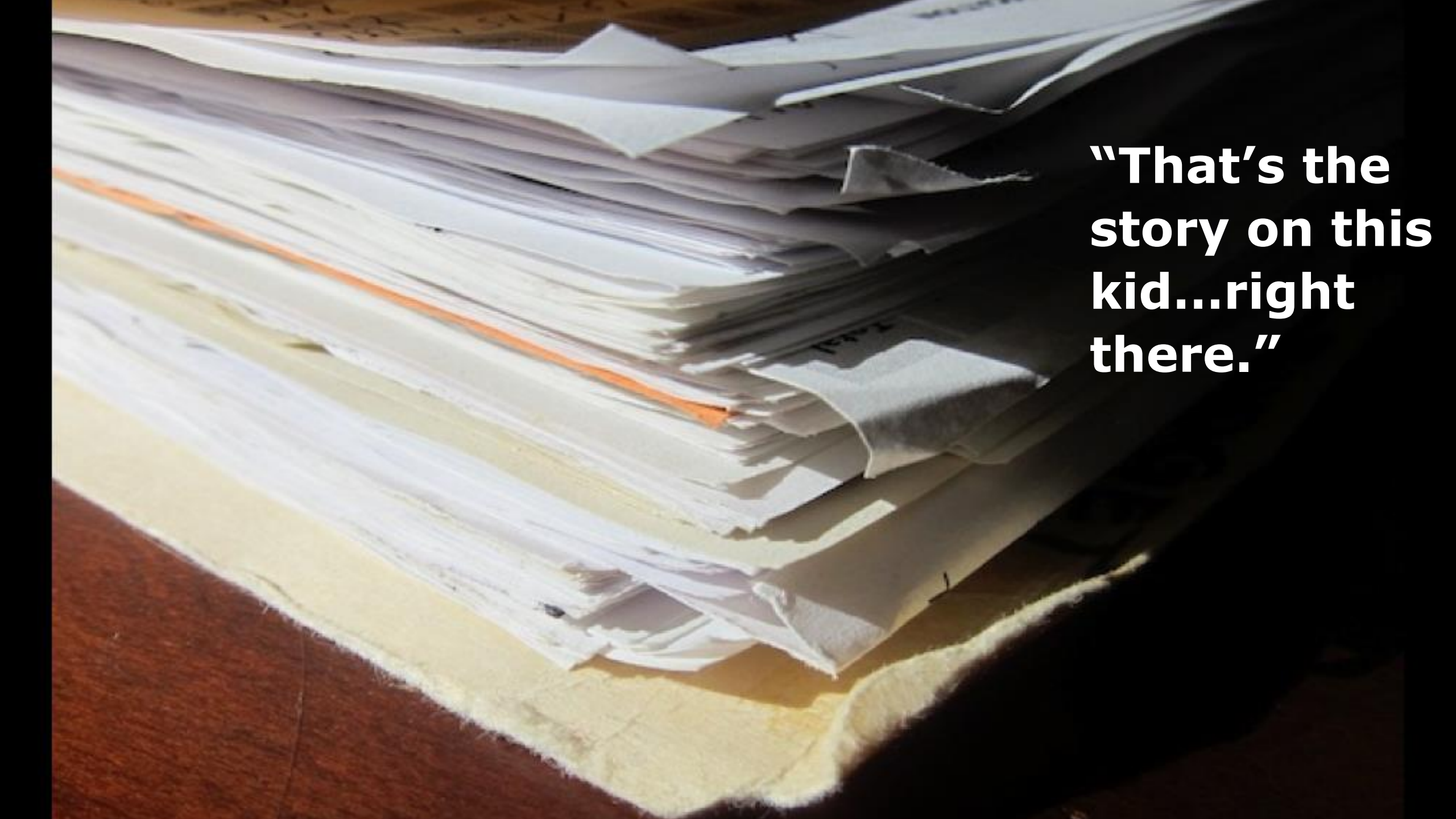




“When children don’t have language,  
their behavior becomes their language.”

—Judge Peggy H. Walker, ret.  
Douglas County Juvenile Court

# A Common View of the Existing System

A large, messy stack of papers and documents is piled up on a wooden surface. The papers are mostly white, but some are yellowed with age. The stack is thick and disorganized, with many pages sticking out and overlapping. The lighting is dramatic, with strong shadows and highlights, emphasizing the texture of the paper and the grain of the wood. The overall impression is one of a vast, unsorted collection of information.

**“That’s the  
story on this  
kid...right  
there.”**

The background of the slide is a grayscale image of a stack of papers, with a computer keyboard visible in the lower right portion. The papers are slightly out of focus, creating a sense of depth. The text is overlaid on this background in a bold, dark blue font.

**The numbers and files can't talk back.**

**But what if they could?**

**What if they told us that we got the  
story wrong?**

**And that our remedy is not a solution.**

How do we move from  
remedies to solutions?

# LOOK AT THE SYSTEM FROM AN EPIDEMIOLOGICAL PERSPECTIVE

## DISEASES

Do not occur by chance.  
There are always **factors that influence** diseases to occur.

Are **not random**.  
Patterns of **factors provide clues** to inform solutions.

## BEHAVIOR PROBLEMS

Do not occur by chance.  
There are always **factors that influence** behavior problems to occur.

Are **not random**.  
Patterns of **factors provide clues** to inform solutions.

There is a crack in everything.  
That's how the **light** gets in.

—Leonard Cohen

The **ability to communicate** is fundamental to the social, emotional, and academic success of children and teens.

Frequent, positive social interactions are the “**fuel**” for brain development and the development of language.





**Language is the primary vehicle** for frequent and positive social connections with caregivers, educators, and peers and **non-negotiable** for education attainment, mental and physical health and well-being, and positive quality of life.



# Speech vs. Language

# **Speech is about producing sounds accurately.**

## **Articulation**

The process by which we make speech sounds using different parts of the jaw or mouth.

## **Fluency**

Continuity, smoothness, rate, and effort of speech sound production.

# Language deals with meaning and connection with others.

**Expressive language:** sharing thoughts and feelings using verbal and nonverbal communication

**Receptive language:** understanding the intents of others

**Pragmatic language:** the social use of verbal and nonverbal communication, e.g., eye contact, facial expressions, gestures

# PREVALENCE

At least **12% of children** entering school have language difficulties that hinder their social development and educational progress.

Significantly predicts problems with:

- behavioral,
- mental health, and
- academic outcomes.





Why does this matter?

“If all my possessions were taken from me with one exception, I would choose to keep the power of communication, for by it I would soon regain all the rest.”

—**Daniel Webster**





Effective use of language is directly linked to **increased student engagement** and **decreased aggressive behavior** and other behavior problems.

In contrast, children and teens who have language difficulties exhibit increased rates of **peer rejection** and **anger**.







In fact, anger may be the symptom  
**(presenting problem)** that indicates  
language difficulties **(basic problem)**.

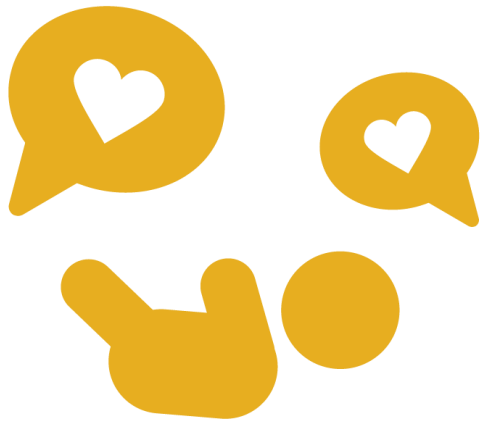


Language difficulties are the most frequent developmental issues among children and teens, yet they are the least noticed.

**REMEDY or SOLUTION**



# Early Clues & Impacts



## Language development starts early.

Frequent social interactions between a baby and their caregiver are the “FUEL” for the development of language.

## Language development has predictable sequences.

- By age 2, most children use single words and brief phrases to communicate for many reasons, including requests for actions (e.g., "daddy up") and requests for comfort (e.g., "mommy hug").
- By kindergarten, they will demonstrate **greater** self-regulation and academic skills and **fewer** externalizing and internalizing problem behaviors.



Research demonstrates that language development is the **most important predictor** of literacy and math outcomes in the early grades.



By the end of elementary school, only **15%** of students with language difficulties achieve the expected level in reading, compared to **61%** of their peers without language difficulties.



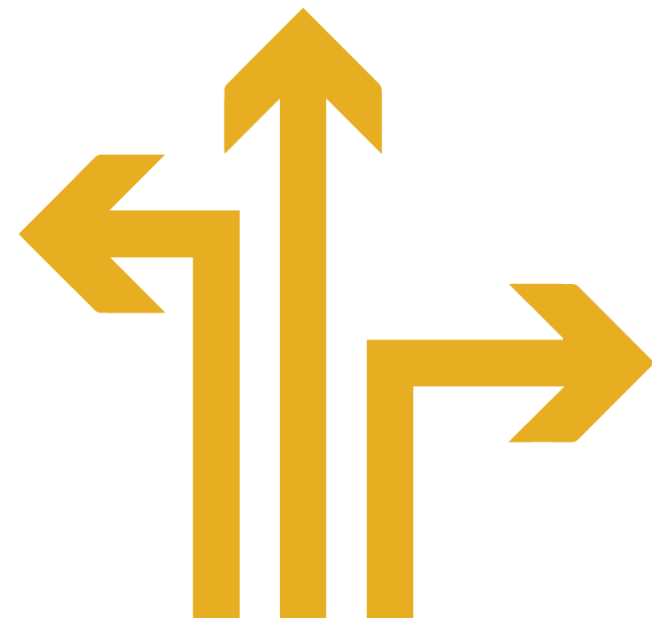
## Impacts Into Adulthood

The pattern continues into adulthood, as children with language difficulties at age five are:

**4X** more likely to have **reading problems** in adolescence and adulthood

**3X** as likely to have **mental health disorders**

**2X** as likely to be **unemployed**





What do language difficulties look like?



# Expressive Language Difficulties

- Having a **low vocabulary** level compared to their peers leads to problems using words to express ideas, thoughts, and feelings.
- **Leaving words out** of sentences when talking.
- Using **tenses incorrectly** (past, present, future).
- Struggling to put words together into a sentence or **may not put together words** correctly in their sentences.



# Receptive Language Difficulties

- Experiencing **difficulty understanding** what people say.
- Struggling to **follow directions** that are spoken.
- Problems **organizing thoughts** for speaking and writing.
- Acting out or withdrawing **when they cannot understand** their social environment.

# Pragmatic Language Difficulties

- Limited ability to “read” social situations, **decipher social cues** or body language, or conform to unspoken rules of social engagement.
- Difficulty **answering questions**, requesting clarification, and initiating and maintaining conversations.
- Making inappropriate and **off-topic comments**.
- Especially **difficult in unfamiliar** situations.



The presence of behavior problems can **distract adults** from considering the existence of language difficulties.

We then **assign “cause” to the behavior** and react to the “cause” instead of the basic problem.



How we characterize behavior often determines how we react to the behavior.

# ATTRIBUTION

How we respond to someone's behavior has more to do with why we think they did something than what they actually did.



What happens when we attribute the wrong cause to the behavior?

## **Fundamental Attribution Error**

After we decide on a “cause” for the behavior we then “characterize” the behavior.



**“That student is lazy, just says ‘I dunno’.”**

Does the student receive extra help?

Does the student have the **language needed to request** help?

**“That student doesn’t care.”**

Does the student receive more information?

Does the student receive an explanation using **words they understand**?

**“That student has an attitude.”**

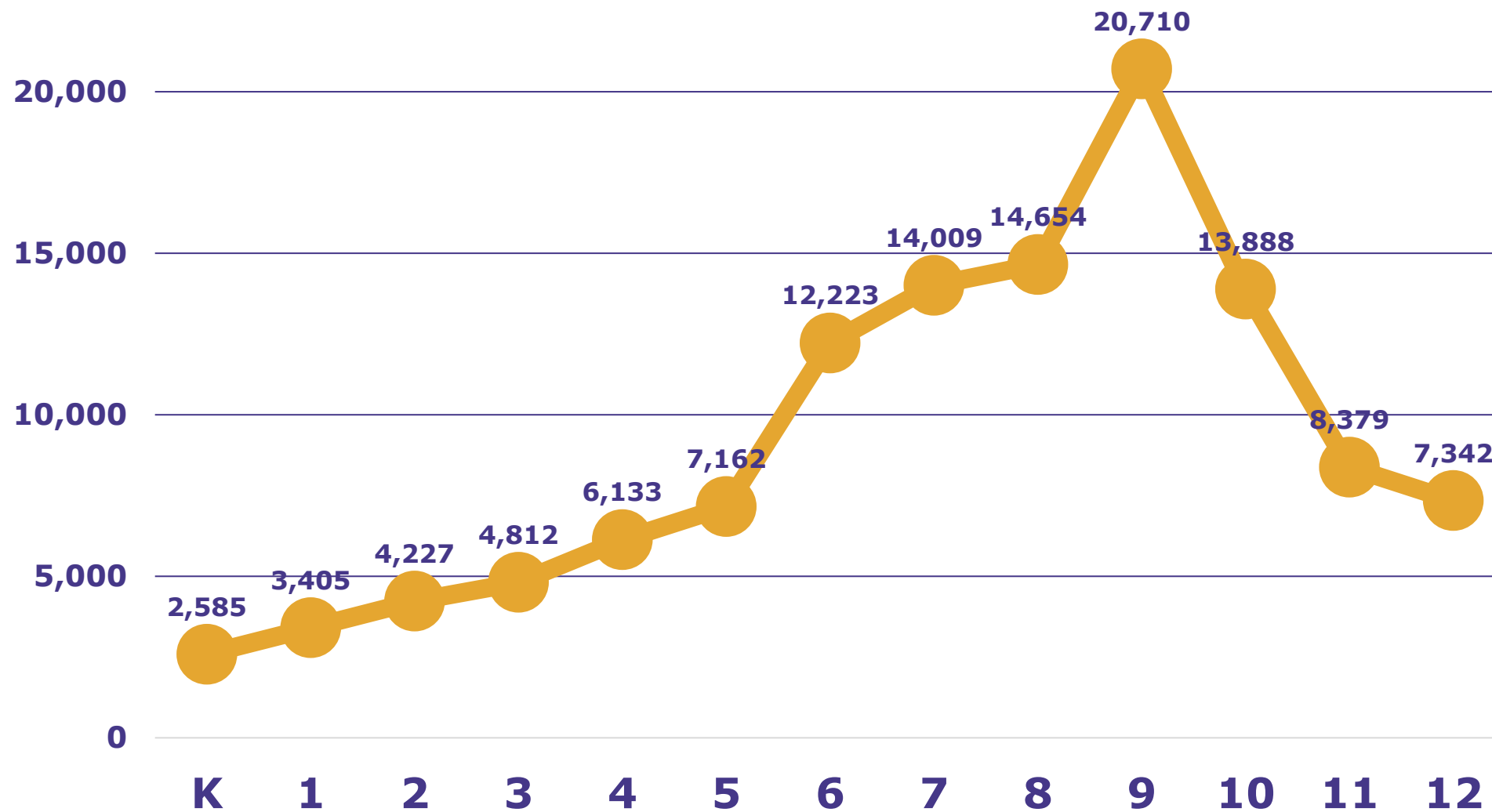
Is the student given an opportunity to express himself?

Does the student have **the language to share** their thoughts?





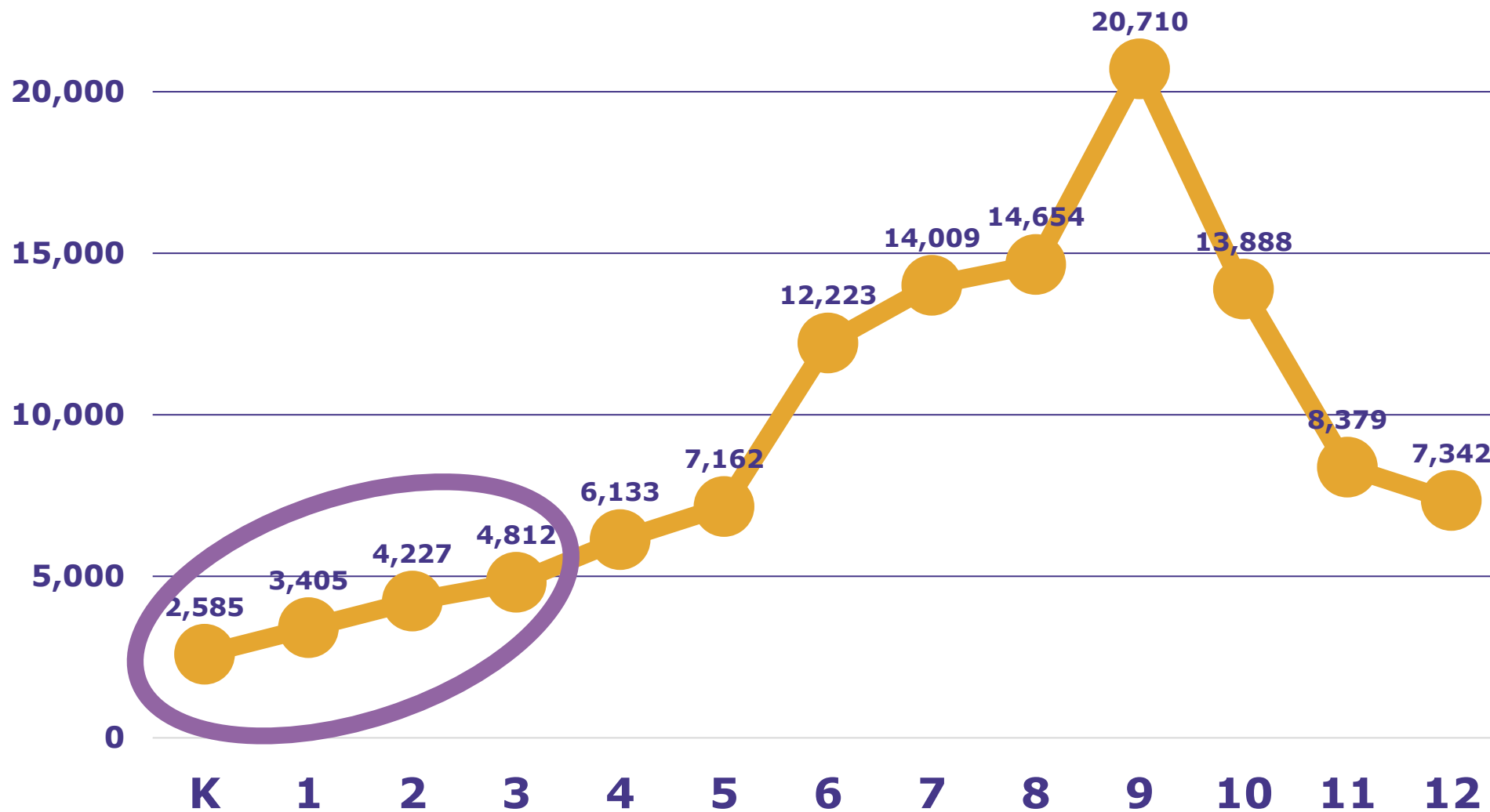
# Georgia Out-of-School Suspensions



74%: "Other"



# Georgia Out-of-School Suspensions

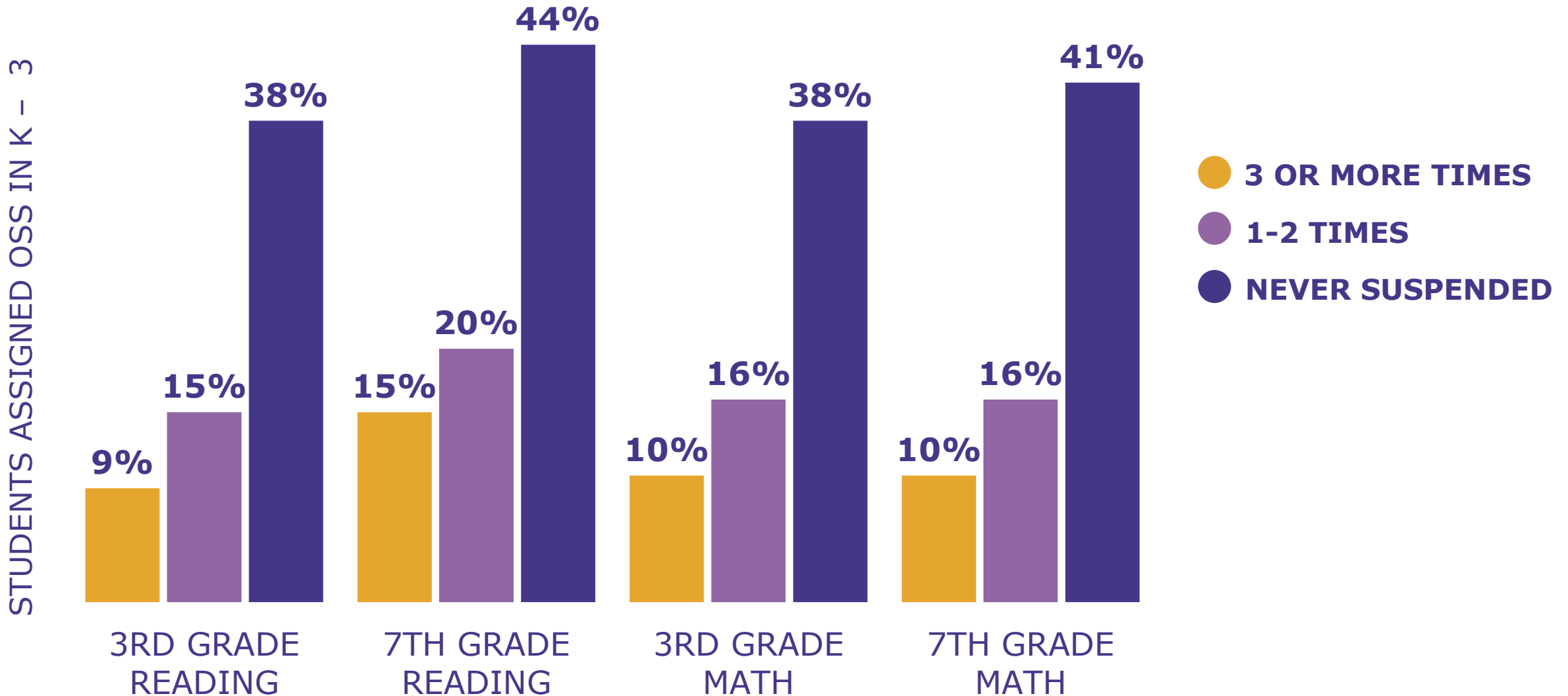


74%: "Other"

# 3RD & 7TH GRADE READING AND MATH EXCEEDS



By K-3 Out-of-School Suspension

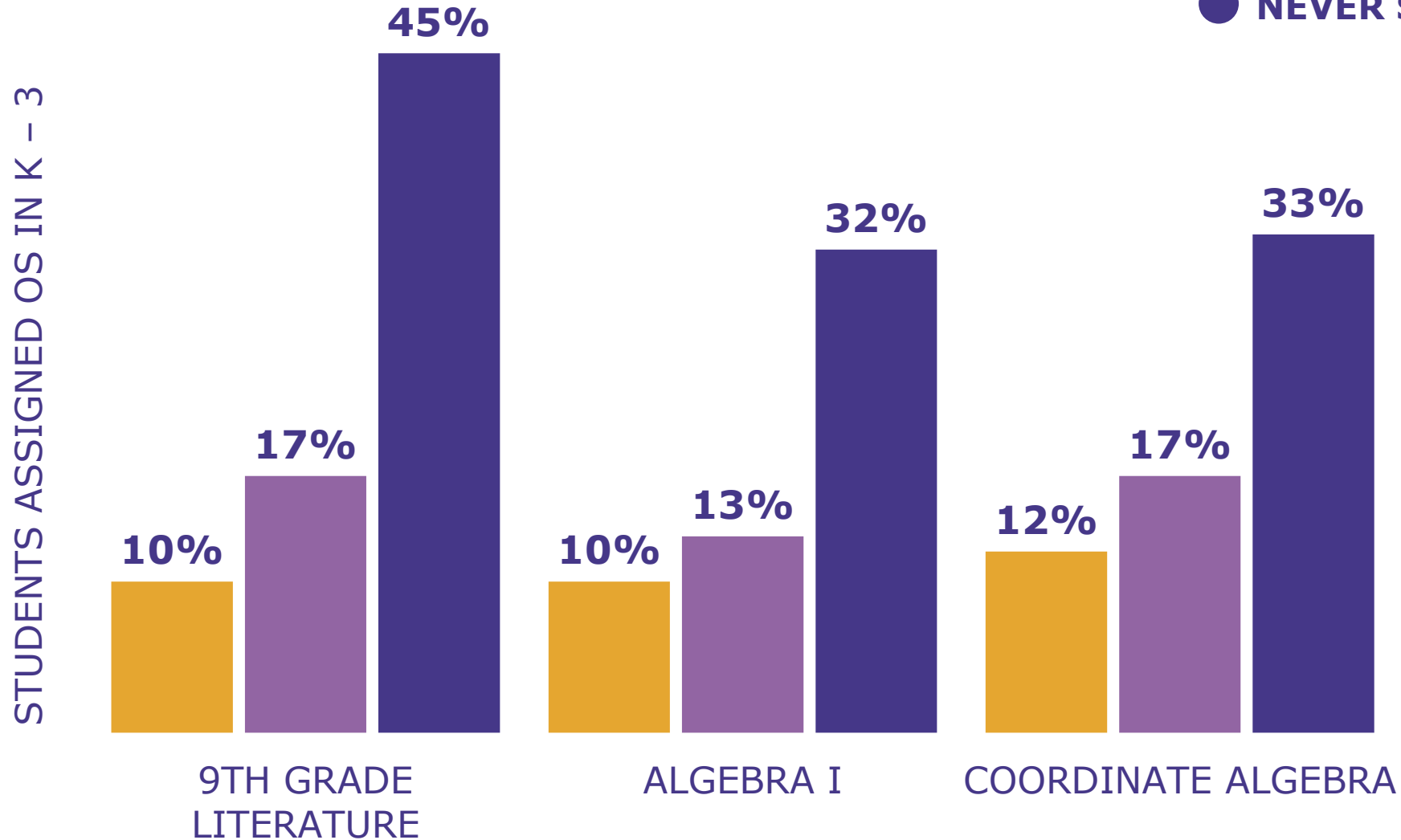


# 9TH GRADE LITERATURE & ALGEBRA EOC ASSESSMENTS, PROFICIENT OR ABOVE

By K-3 Out-of-School Suspension

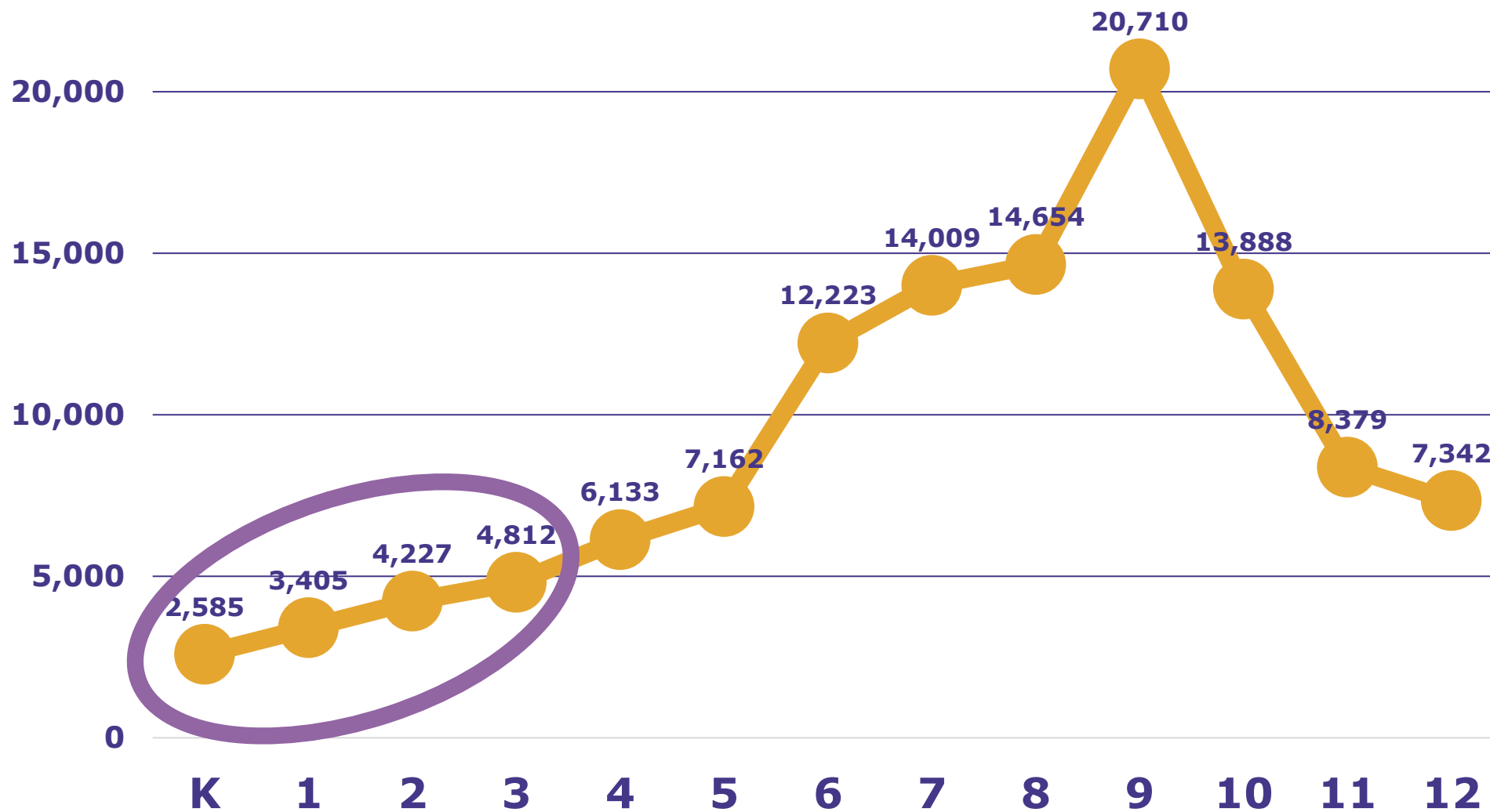


- 3 OR MORE TIMES
- 1-2 TIMES
- NEVER SUSPENDED





# Georgia Out-of-School Suspensions



74%: "Other"

REMEDY  
or  
SOLUTION?

Language difficulties are frequently misinterpreted and **mischaracterized** as:

- Inattention
- Defiance
- Cognitive problems
- Anger
- A lack of willingness to engage



Language is a “missing link” to finding solutions.

And all too often missed.



It can help to re-conceptualize behavior as **a form of language**. What is the behavior telling you?  
What are they trying to communicate?

This represents a shift from  
**REMEDIES to SOLUTIONS**

How does language link to  
mental health?



Although not often apparent...

...language development is a significant contributing factor to the **prevention of emotional and mental health problems** throughout childhood and adolescence.

## Direction of Effect

Studies of children ages 2 to 13 demonstrate that language difficulties **predict later behavioral problems** more strongly than behavioral problems predict later language difficulties.

Points to noticing and enhancing language development as a useful tool to help **prevent and mitigate** behavioral problems...

...let's look at this a little more deeply...





Language has a **demonstrated protective effect** on the mental health of children and teens, as the ability to share and cope with emotions relies on an “inner language.”

In contrast, the failure to develop a capacity for effective communication **often leads to** inattention, hyperactivity, self-regulation problems, and jeopardizes emotional and mental health.

For example, findings from a study of 265,000 five-year-old children reveal that children with effective use of language and communication were **19 times** more likely to have high mental health competence than children without effective use of language and communication.



Notices of language difficulties is complicated by the fact that they are often quickly misinterpreted, characterized, and labeled.

**WE OFTEN PATHOLOGIZE BEHAVIOR**

## LABELS or DESCRIPTIONS?

For example, **ADHD, ODD, and conduct disorder** share similar characteristics with language difficulties.

- Difficulty listening when spoken to
- Problems following instructions
- Talking excessively
- Blurting out answers
- Interrupting
- Not waiting for turns in conversation

“Nothing works.”

“I know something’s wrong, but I can’t put my finger on it.”

Is it language?

## INNER LANGUAGE

Language provides one's **"inner dialogue"** required to effectively reason, comprehend, self-regulate, and cope with the demands of everyday life.

Children and teens with a strong inner dialogue are more likely to self-regulate, cope with problems, and are better protected against depression.

In contrast, children and teens with language difficulties struggle to develop an inner dialogue and less likely to reason, understand others, self-regulate, and cope with problems.





What does this mean?



Operating at the **surface level when the situation requires a deeper understanding** of a child's emotional state can result in a young person being judged as selfish or uncaring.

Instead, consider **the possibility** of language difficulties.

**A basic problem. Not just a presenting problem.**



Talk-based therapy for children and teens is often based on the **assumption that their language represents their thoughts** and feelings.

For those with language difficulties, such a situation can be confusing and stressful.



Understanding language development in children and teens will not only influence the diagnostic process, it will also help determine the most **appropriate response**.



For example, a 10-year-old boy was referred with a diagnosis of psychosis based on his peculiar responses in testing. During therapy sessions, he was extremely active and talkative. Questioning and problem-solving approaches often led to inappropriate and peculiar verbal responses.

A language screening indicated possible receptive language difficulties. When the therapist enhanced opportunities for the child to engage in therapy by adding visual cues (pictures and drawings), the child's activity level decreased, and he was able to work with the therapist.

He was able to draw pictures of the problem situation (i.e., being teased by peers) and then draw alternative ways of dealing with frustration and anger.



In another example, a five-year-old student had temper tantrums every time the teacher instructed the students to move from one activity to another.

The teacher, because of her training, noticed that the student did not appear to understand the instructions. Therefore, she gave the student a stuffed animal to take with him during any type of transition; the temper tantrums ceased.

**How is language linked with  
child welfare?**

# LANGUAGE-TRAUMA LINK

- Children and teens who experience **trauma** are often literally “out of touch” with their feelings, and **frequently have no language** to describe their internal states.
- The **lack of “inner dialogue”** constrains a child’s ability to reason effectively, regulate emotions, and cope with problems.





# LANGUAGE DIFFICULTIES AND CHILD WELFARE

Children and teens who have experienced abuse and neglect are **3 to 6 times** more likely to have language difficulties than their non-maltreated peers.

As a result, this can limit their use of language to communicating basic needs rather than for social or emotional reasons, such as thoughts and feelings.

# LANGUAGE DIFFICULTIES AND CHILD WELFARE

Research comparing the pragmatic language (i.e., social communication) of 42-month-old neglected children to their same-age peers, found that **44% of neglected children** had pragmatic language difficulties, compared to only 4% of non-neglected children.

# LANGUAGE DIFFICULTIES AND CHILD WELFARE



A review of studies examining maltreated, **school-age children and teens** found that **86%** had significant language difficulties.

# LANGUAGE DIFFICULTIES AND CHILD WELFARE

Children and teens in foster care who are in talk-based behavior therapy and case planning are effectively in a **“second language”** environment if language and communication development has not been considered.

# LANGUAGE DIFFICULTIES AND CHILD WELFARE

Children and teens in foster care with language difficulties are more likely to experience:

- Problems with resilience and well-being;
- Low overall educational attainment;
- Challenging behavior; and
- Problems with behavioral and mental health interventions.

# LANGUAGE DIFFICULTIES AND CHILD WELFARE

Children and teens in foster care with language difficulties have **longer stays in care** than their peers.

# **Child A's Story**

## Child A's Story

Prior to her present placement, a 15-year-old girl had 20 previous placement breakdowns and a history of aggressive verbal and physical behavior.

She had **previously been identified as having no obvious difficulties with her ability to communicate**, but that she would communicate emotion by her behavior.

Following staff concern about her language and communication, a language screening was completed and indicated a likelihood of difficulties, especially with expressive and pragmatic language. The results were **used to inform** her foster parents, case managers, teachers, therapists, and the court staff about **opportunities to enhance** their practice and environments to foster Child A's engagement at home, in school, during therapy, and in the courtroom.



## **Child A's Story**

As a result of enhancing opportunities to foster investment, independence, and initiation in all settings, her communication, social engagement, and behavior improved significantly.

Her case manager said: "What I have experienced is her improved confidence in expressing herself, listening, and understanding. This has been an invaluable part of the progress she has made in placement and has allowed her greater opportunities to make meaningful relationships with adults and peers alike."

**How is language linked with  
juvenile justice?**



# LANGUAGE DIFFICULTIES AND JUVENILE JUSTICE

Children and teens involved with juvenile justice are **5 times** more likely than their peers to have language difficulties.

## HOWEVER

Most are not typically given a language screening.





## Do language difficulties impact interventions?

Language Difficulty	Manifestation In A Restorative Practice Conference
Expressive language difficulty	<p>A <b>lack of emotion-related words needed to express remorse</b> and convey authenticity, even if felt and intended.</p> <p>“Yep,” “nope,” “dunno,” “maybe”—all minimalist responses aimed at avoiding having to speak, but potentially <b>conveys resistance to engagement</b> in the process.</p>
Receptive language difficulty	<p><b>Appears to understand</b> what is being said. May nod in agreement but misses important nuances.</p> <p>Struggles to understand figurative language, such as metaphors.</p>



# LANGUAGE DIFFICULTIES AND JUVENILE JUSTICE

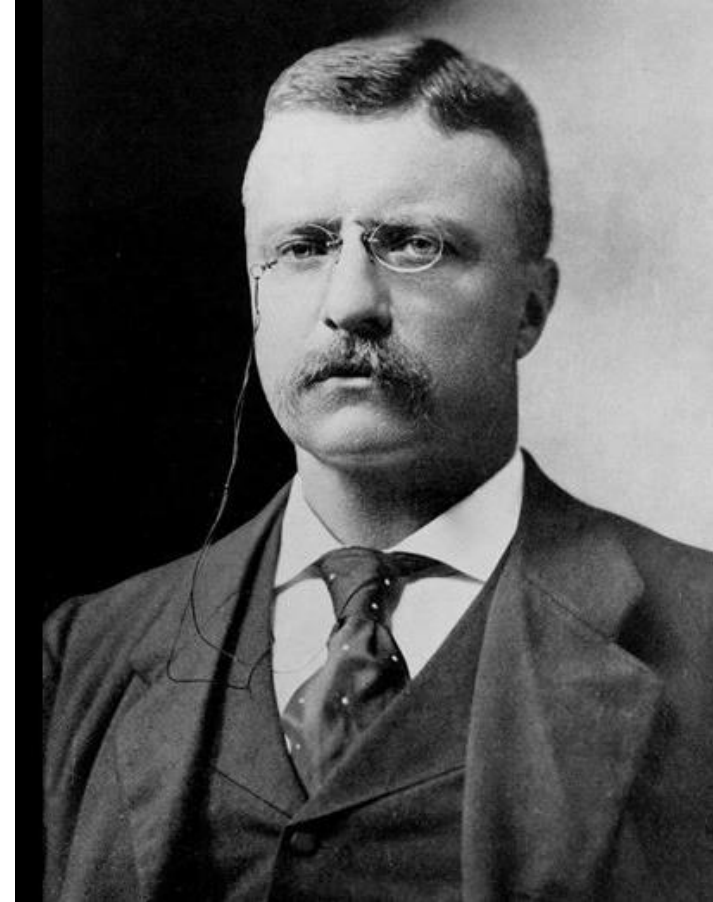
Expression of **remorse** is very complex and requires the effective use of language and social communication.

In other words—not only must the words be correct, but the delivery, tone of voice, and facial expression must match.



“Complaining about a problem without proposing a solution is called whining.”

—Teddy Roosevelt



What can be done?



When a flower doesn't bloom,  
you fix the environment in which it grows,  
not the flower.

ALEXANDER DEN HEIJER







Include language as a well-being indicator, the same as others (e.g., vision, hearing, oral health).

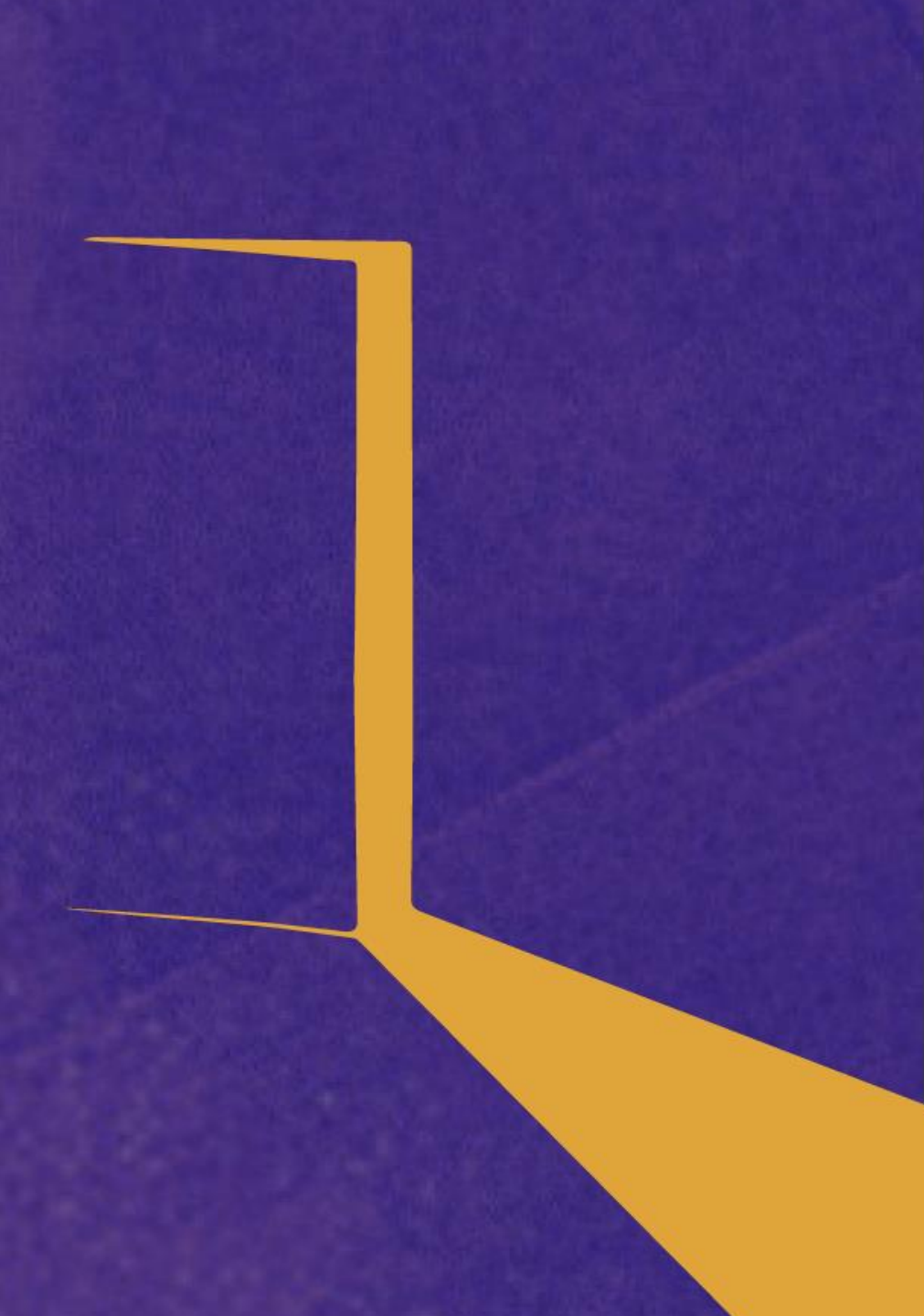


Expand use of strategies in routine well-child visits that provide families with guidance about **noticing** — and opportunities to enhance — language development.



**Provide training** to increase awareness and understanding of the relationship between language development and mental health.





**In an attempt to employ language as a well-being indicator**, individuals, practitioners, and policymakers can integrate the following practices into everyday settings...

- \*Language Development by Age Band*
- \*\*SEE-KS Social Engagement Ladder*
- \*\*\*SEE-KS Quick Reference Tool*

Individual  
therapy

If engagement levels of specific children or teens are low on multiple occasions, **SCREEN** to discern potential language difficulties  
e.g., PLS-5, CCC-2, CELF

Train everyone to **NOTICE** indicators of language development in children and teens.\*

**MONITOR** engagement\*\* as a means to gauge language development.

Use screening results to **ENHANCE** opportunities for frequent, positive, language-rich social interaction and continue to monitor engagement.

# Language Development by Age Band (Birth to 18 Years)



## Birth - 6 Months

### The child is able to...

- Show a preference for looking toward people's eyes and faces
- Respond to a caregiver's voice by looking and listening
- Smile in response to caregiver
- Vocalize and babble in a back and forth manner

## 6 - 12 Months

### The child is able to...

- Shift their eye gaze between people and objects
- Share emotions by looking at others, smiling, and using facial expressions
- Use their sounds and babbles to gain attention
- Pair gestures with eye contact
- Communicate frequently with others to request and protest
- Share what interests them with gestures, sounds and eye contact
- Participate in social routines such as peek-a-boo
- Imitate simple sounds and actions demonstrated by others (e.g. clapping, waving, silly sounds)
- Look up and/or turn towards the sound of their name being called

## 12 - 18 Months

### The child is able to...

- Respond to others by looking and listening
- Pair gestures with sounds and words to direct communication
- Communicate nonverbally for many reasons (e.g., requesting, protesting, and starting social games).
- Use a range of gestures such as giving, showing, waving, pointing, and shaking one's head
- Recognize a caregiver's emotion (e.g., mirroring sadness, happiness)
- Imitate sounds and simple words
- Use early ritualized words such as "bye" and "no"
- Imitate and show off simple play actions (push a car, building with blocks)

## 18 - 24 Months

### The child is able to...

- Use a variety of gestures, facial expressions and sounds across people and settings
- Use single words for not only object labels, but also people's names, action words, modifiers, and relational words (e.g., up, down, in)
- Take turns within interactions with others
- Communicate for many reasons (e.g., seeking comfort, greeting others, showing off)
- Share their enjoyment and interests with eye contact, smiles and sounds
- Demonstrate play actions with toys (e.g. pour a drink, feed a doll, put baby to bed)

## 24 - 36 Months

### The child is able to...

- Use and understand combinations of words (e.g., Mommy go outside)
- Express and share simple emotions with words (e.g., Mommy is happy, I am mad)
- Request a soothing activity when distressed
- Request assistance from others
- Use simple self-regulatory language to maintain engagement within an activity (e.g., "first...then")

# Language Development by Age Band (Birth to 18 Years)



## 3 - 4 Years

### The child is able to...

- ❑ Understand and use more multi-word combinations including people's names, verbs, and nouns.
- ❑ Understand and use more sophisticated grammar (e.g., pronouns, possessives, tense)
- ❑ Request a break and/or soothing items when distressed
- ❑ Use self-regulatory language to talk through transitions between activities
- ❑ Recognize and describe emotions of oneself and others



## 4 - 5 Years

### The child is able to...

- ❑ Use a range of creative language, including both simple and complex sentences
- ❑ Engage in short dialogues, such as recalling past events or simple stories
- ❑ Use some politeness terms or markers (e.g., please, thank you)
- ❑ Determine causes for emotions of self and others
- ❑ Use self-regulatory language to talk through more extended activities (e.g., multi-step instructions)
- ❑ Recognize and repair breakdowns in communication and express remorse



## 6 - 11 Years

### The child is able to...

- ❑ Engage in conversation by staying on topic for extended interactions
- ❑ Balance comments and requests for information
- ❑ Adapt tone of voice to different listeners (e.g., adults versus peers)
- ❑ Provide essential background information based upon listener's perspective
- ❑ Initiate and maintain conversations that are related to the topic and the interests of others
- ❑ Think about the conversational partner's likes, dislikes and emotions
- ❑ Tell stories and enact social sequences role playing and visualizing an event before it takes place
- ❑ Use self-regulatory language to talk through multi-step activities and plan for future events



## 12 - 18 Years

### The adolescent is able to...

- ❑ Understand and use nonverbal gestures, facial expressions, and gaze to express and follow subtle intentions (e.g., sarcasm and other nonliteral meanings)
- ❑ Understand and use tones of voice to express and follow emotional states
- ❑ Understand and use more sophisticated language (e.g. word choice) to provide background information for one's listener
- ❑ Understand and use more sophisticated language to describe relationships within conversation
- ❑ Understand reading passages and use written expression to share experiences
- ❑ Problem solve and self-monitor future, goal-directed, behavior (i.e., executive functioning)
- ❑ Perceive one's actions within social events and predict social behavior in others in order to self-monitor
- ❑ Effectively negotiate and collaborate within interactions with adults and peers

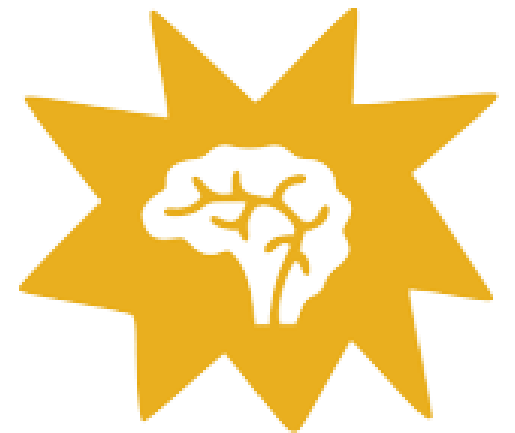
**Train mental health providers to complete a brief language screening (e.g., PLS-5, CCC-2, CELF-5) as part of initial assessment for all children and teens referred to them and apply findings to inform the diagnostic process and interventions considered.**

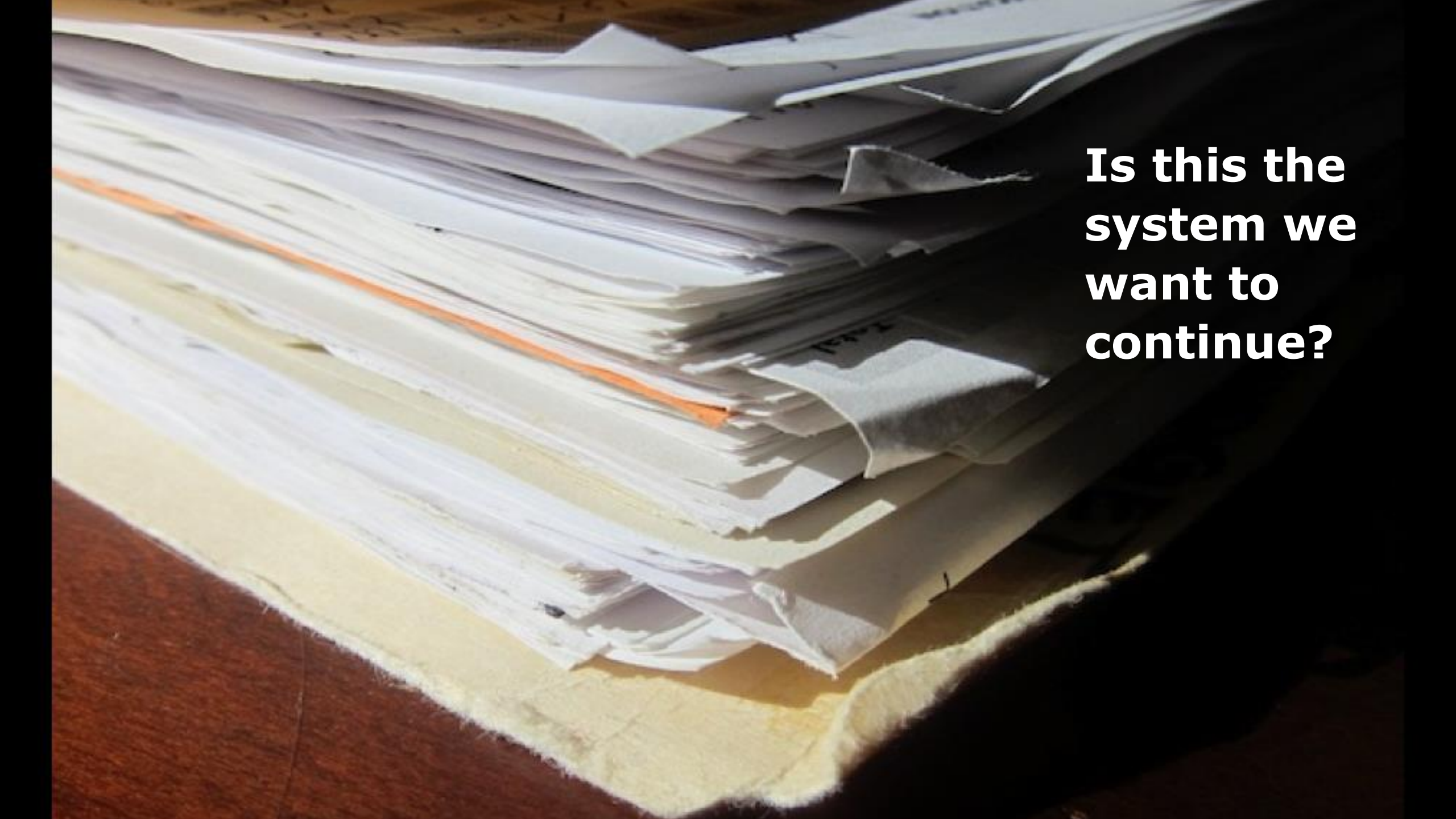




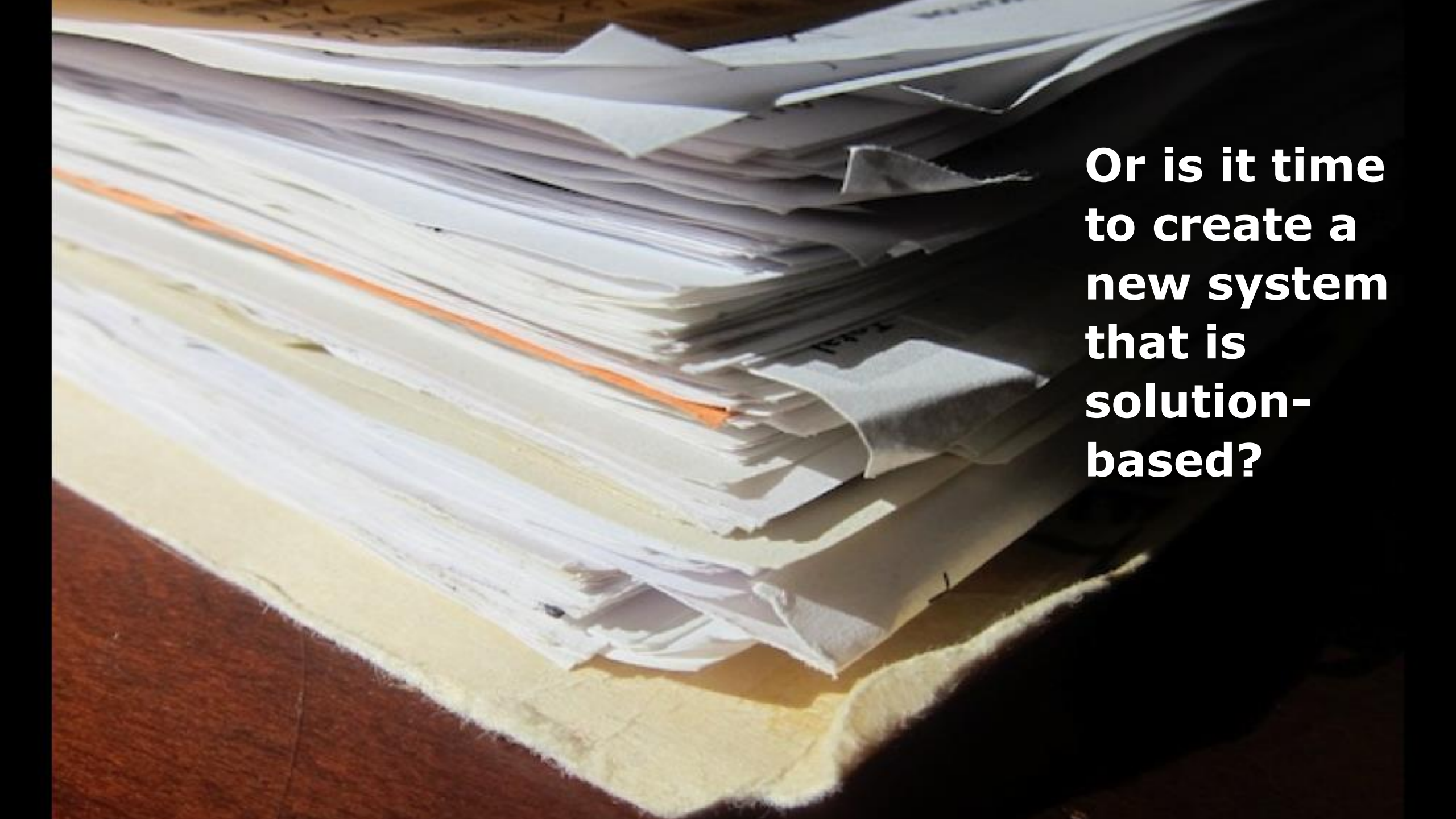
Conduct a **review of existing practices and policies** to identify, and **proactively** include, opportunities to enhance engagement as the gauge of language development.

This recommendation is intended to **address the gap** between our knowledge of the impact of language and our **universal** practice and policies.



A large, messy stack of papers and documents, some white and some yellowed, piled on a wooden surface. The papers are crumpled and overlapping, creating a sense of clutter and disorganization. The lighting is dramatic, with strong shadows and highlights, emphasizing the texture of the paper and the grain of the wood.

**Is this the  
system we  
want to  
continue?**

A large stack of papers and documents, some yellowed and some white, piled up on a wooden surface. The papers are disorganized and overlapping, suggesting a large volume of data or a complex system. The lighting is dramatic, with strong shadows and highlights.

**Or is it time  
to create a  
new system  
that is  
solution-  
based?**

**Solutions — not remedies.**