

AS A MISSING LINK & MISSED OPPORTUNITY

PART 1: WHY

PURPOSE OF THIS TOOLKIT

This toolkit is designed for **individuals**, **practitioners**, **and policymakers** to employ practices that apply language as a well-being indicator to improve educational, mental health, and well-being outcomes—and impact quality of life for children—from birth through high school.

PART 1: WHY

PART 2: WHAT

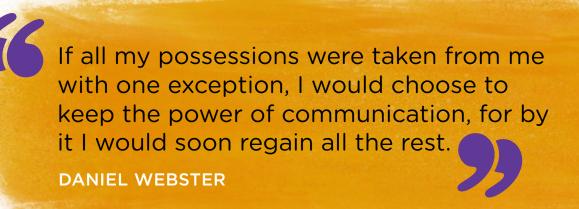
PART 3: HOW

Language development dramatically and positively impacts life outcomes. Conversely, the failure to develop a capacity for effective communication jeopardizes emotional well-being and educational attainment. We must institute a new, proactive approach in which all who interact with caregivers and children employ the understanding that language is the primary vehicle for frequent and positive social connections. This approach will consider language as a well-being indicator that is foundational for literacy and academic success, emotional and mental health, and positive quality of life.

Follow these steps to proactively employ language as a well-being indicator. Practical strategies are provided to enable us to **NOTICE** indicators of language development from infancy through adolescence, MONITOR engagement as a means to proactively gauge language development, SCREEN for potential difficulties with language development if indicated, and use the information gained from screening to **ENHANCE** opportunities for engagement at home, in the classroom, and in community settings. When children are engaged, their use of language is frequent, functional, socially oriented, and fluid across settings.

Get tools to implement the "why" and "what" in a manner that's sustainable for individuals, practitioners, and policymakers. This section is designed to help apply the understanding that language is the primary vehicle for frequent and positive social connections. It begins with how we as peers can mentor one another—parent to parent, health care provider to health care provider. educator to educator—to identify what we're already doing to enhance engagement and opportunities to identify next steps. Several ideas are offered to apply this vision designed to address the gap between our knowledge of the impact of language and our universal practices and policies.

PART 1 WHY



Language is the primary vehicle by which one communicates needs, formulates ideas, develops and maintains relationships, and understands the world around us. ¹

Language includes: 2

- **Expressive language:** expressing one's thoughts and feelings using gestures, words, and writing
- Receptive language: understanding the intents of others
- **Pragmatic language:** the social use of verbal and nonverbal communication

Language is foundational for literacy and educational success, emotional and mental health, and positive quality of life.

Language has a demonstrated protective effect on mental and physical health and well-being. ⁶

Language provides the "inner dialogue" essential to effectively reason, comprehend, self-regulate, and cope with the demands of everyday life. ^{7,8}

WHY is language a missing link to social, emotional, cognitive, and academic development? ¹⁰

- Development and use of language—from infancy through adolescence—can dramatically impact an individual's quality of life and outcomes.
- The failure to develop a capacity for effective communication jeopardizes social connectedness, educational outcomes, and emotional and mental health.
- Difficulties with language development are associated with an increased risk of persistent emotional and mental health problems, school dropout, involvement with the juvenile justice system, and unemployment.
- Language development has a significant role in these outcomes, yet it is often not considered when developing solutions.
- Without noticing language as a missing link, we're losing opportunities to improve the quality of life for children of all ages.

WHY is language an opportunity?

- If we consider language as a well-being indicator similar to others such as vision, hearing, and oral health, we can lessen the likelihood of misdiagnoses and prevent adverse outcomes.
- If we apply the understanding that engagement is a proactive gauge of language development, we can boost social communication, emotional regulation, and executive functioning.
- Language provides the capacity to obtain and understand basic health information essential to make appropriate health decisions that can impact lifelong physical and mental health outcomes.

It's time for individuals, practitioners, and policymakers to institute a new, proactive approach that employs language as a well-being indicator.

Speech vs. Language

Speech is how we physically produce sounds—articulation, voice, and fluency.

Language is about meaning and connection with others—expressing thoughts and emotions, understanding others' intentions, and deciphering social cues.

WHY is language a missing link?





(Birth to 3 Years)



Early Childhood

(3 to 5 Years)



Elementary and Secondary School-Aged Children

(5 to 18 Years)



Child Welfare



Juvenile Justice

The Missing Link

Frequent social interactions between babies and their caregivers are the "fuel" for developing language.

Language development through social connections in infants and toddlers has a direct impact on their emotional resilience.

The Missing Link

Language development in early childhood significantly predicts third-grade literacy and math outcomes.

Young children with well-developed language demonstrate greater self-regulation and academic skills and fewer emotional or behavioral problems at kindergarten entry.

The Missing Link

School-aged children with well-developed language also develop a strong "inner dialogue" that is needed to bolster social, emotional, cognitive, and academic development.

Difficulties with language development are frequently misinterpreted as cognitive, emotional, or behavioral problems.

The Missing Link

Difficulties with language development are often the missing link in children in foster care, when they appear to be out of touch with their feelings, use challenging behavior, and disengage with their caregivers, educators, and health care providers.

Children who have experienced abuse and neglect are at least three to six times more likely to have difficulties with language development than their peers, particularly in the areas of expression and social use of language. This often limits their use of language to communicating basic needs rather than for social or emotional reasons.

The Missing Link

Children and teens involved with juvenile justice are five times more likely to have difficulties with language development expected for their age than their peers who are not involved with juvenile justice.

Language is almost never considered when a child or teen doesn't understand the proceedings of the juvenile justice system, and when there is difficulty effectively expressing remorse. The expression of remorse is complex and requires effective use of language. Not only must the words be correct—but the delivery, tone of voice, and facial expression must also match.

Infants and Toddlers (Birth to 3 Years)

The Missing Link

Frequent social interactions between a baby and their caregiver are the "fuel" for the development of language.

Language development through social connections in infants and toddlers has a direct impact on their emotional resilience.

The Opportunity

By mentoring caregivers to engage in language-rich social interactions, we create an opportunity for infants and toddlers to feel socially connected, understand routines, and express themselves through body language, gestures, and words.

When infants fall in love with the social world, the social brain becomes wired to learn language, which sets the stage for later social and academic success.

In this video, notice what the caregiver is doing to enhance engagement with her infant—such as sitting face to face, singing to the child, and responding to the child's cues (2:19-2:36).

The Research

By age 2, most children use single words and brief phrases to communicate for many reasons, including requesting actions ("daddy up") and requesting comfort ("mommy hug"). By kindergarten, they will demonstrate greater self-regulation and academic skills and fewer challenging behaviors. ^{3, 4}

Action Items

- Consider language as a well-being indicator similar to others like vision, hearing, and oral health. ¹
- Provide language nutrition coaching with expecting and new parents to strengthen caregiver efficacy to engage in frequent, positive, language-rich social interactions with their babies.
- Provide support for families of infants within birthing hospitals, including those admitted to a neonatal intensive care unit (NICU), to experience socially engaging interactions with their babies.
- Implement a comprehensive approach in preventative care settings to universally notice, monitor, screen, and enhance engagement within typical interactions between families and their infants. (Refer to the "What" toolkit to learn more.)



Early Childhood (3 to 5 Years)

The Missing Link

Language development in early childhood significantly predicts third-grade literacy and math outcomes.

Young children with well-developed language demonstrate greater self-regulation and academic skills and fewer emotional or behavioral problems when they enter kindergarten.

The Opportunity

Provide training for early childhood educators to enhance opportunities for engagement to help all children feel socially connected, understand social norms and routines, and communicate to others what they have learned. When children are engaged, their use of language is frequent, functional, socially oriented, and fluid across settings.

The Research

Results from a national study of more than 265,000 5-yearolds found 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. ²⁰

Children who have difficulties with language development at age 5 are four times more likely to have reading difficulties, three times more likely to have mental health difficulties, and two times more likely to be unemployed as an adult. ¹⁰

Action Items

- Consider language as a well-being indicator similar to others like vision, hearing, and oral health.
- Expand use of strategies in routine well-child visits that provide families with guidance about noticing and how to enhance language development.
- Implement a comprehensive approach in early childhood settings to notice, monitor, screen, and enhance engagement within universal early childhood practice. (Refer to the "What" toolkit to learn more.)

In this video, learn about investment as an element of engagement. Investment is the "why" of social interaction. We're more invested with those we interact with who stimulate our interest and provide support for us to stay connected (1:58-2:26).





Elementary and Secondary School-Aged Children (5 to 18 Years)

The Missing Link

School-aged children with well-developed language also develop a strong "inner dialogue" needed to bolster social, emotional, cognitive, and academic development. ^{7,8}

Difficulties with language development are frequently misinterpreted as cognitive, emotional, or behavioral problems. ⁵

The Opportunity

We can support language development by universally strengthening engagement in the environment using multimodal instruction to stimulate interest and motivation with hands-on materials, support an understanding of social norms and routines through peer role models and visuals, and provide options and opportunities to convey one's thoughts and feelings.

When language is enhanced, the risk for behavior challenges and mental health concerns can be mitigated. Language is vital to the development of an inner dialogue, which is required to effectively reason, regulate emotions, and cope with problems. This has a demonstrated protective effect on children's mental health.

The Research

Approximately 12% of children entering elementary school nationwide have difficulties with language development that hinder both their social and emotional development and educational progress—whether or not their primary language is English. By the end of elementary school, only 15% of students with language difficulties achieve the expected reading level, compared to 61% of their peers. ^{3, 19}

Action Items

- Consider language as a well-being indicator similar to others like vision, hearing, and oral health.
- Train educators to notice indicators of language development expected by age band and the engagement levels of their learners, such as social connectedness, following social norms and routines, and the ability to express to others what they've learned.
- Support educators to enhance engagement through multiple modes of instruction—embedding language within natural routines that provide visuals, hands-on materials, and shared experiences so that all students can share ideas, understand classroom discourse, transition from one activity to another, and successfully communicate.
- Implement a comprehensive approach in school settings to notice, monitor, screen, and enhance engagement within classroom lessons. (Refer to the "What" toolkit to learn more.)

In this video, notice the teacher's provision of visuals and related materials for each child and how this appears to provide an option that enhances initiation, a key element of engagement (4:00-4:27).







WATCH VIDEO

Child Welfare

The Missing Link

Difficulties with language development are often the missing link in children in foster care, when they appear to be out of touch with their feelings, use challenging behavior, and disengage with their caregivers, educators, and health care providers. ¹⁵

Children in foster care are more likely to have difficulties with the social use of language. This often limits their use of language to communicating basic needs rather than for social or emotional reasons. ¹²

The Opportunity

When caregivers, educators, health providers, and court staff enhance their practices and environments to foster children's engagement at home, in school, and other routine settings, more positive social, academic, and mental health outcomes can be achieved.

The Research

Children who have experienced abuse and neglect are at least three to six times more likely to have difficulties with language development than their peers, particularly in the areas of expression and the social use of language. Research revealed that 44% of 42-month-old neglected children had pragmatic language (social communication) difficulties, compared to 4% of non-neglected same-age peers. ^{14, 18} Children in foster care who do not indicate language development typically expected for their age experience longer stays in care than those without language difficulties. ¹⁸

Action Items

- Consider language as a well-being indicator similar to others like vision, hearing, and oral health.
- Review and update existing policies, procedures, and practices to employ language as a well-being indicator through developmentally responsive intake, assessment, care planning, and discharge protocols.
- Provide education to increase awareness and understanding of the relationship between language development and mental health development so that appropriate guidance is provided to meet children's needs.
- Implement a comprehensive approach that enables family members, care providers, case managers, and others to notice, monitor, screen, and enhance engagement in every-day activities at home, at school, and in the community. (Refer to the "What" toolkit to learn more.)



Juvenile Justice

The Missing Link

Children and teens involved with juvenile justice are five times more likely to have difficulties with language development expected for their age than their peers who are not involved with juvenile justice.

Language is almost never considered when a child or teen doesn't engage in court proceedings and when there's difficulty effectively expressing remorse. In the justice system, expressions of remorse perceived as adequate are often rewarded, while inadequate expressions of remorse may result in harsher penalties.

However, expressing remorse requires substantial expressive, receptive, and pragmatic language. Not only must the words be correct, but the delivery, tone of voice, and facial expression also need to match. 10-12

The Opportunity

If we educate iuvenile court and iuvenile justice staff to notice a child's language development upon intake, we have the opportunity to enhance our practices and environments in accordance with a child's ability to understand judicial proceedings, express remorse, and effectively communicate thoughts and feelings.

This opportunity can be also be extended beyond intake by mentoring those interacting with children in juvenile justice facilities to strengthen the environment by promoting language use and understanding through multimodal strategies, such as visual supports for understanding, hands-on materials, and role play or rehearsal.

For example, remorse is developed within reflective discourse and with the role models of caregivers.

The Research

Nearly two-thirds of children and teens involved with juvenile justice have significant levels of difficulty with language development that compromise their participation during intake proceedings and their ability to engage in and benefit from rehabilitative strategies. However, language and communication are almost never considered at any point in the process. 11

Action Items

- Consider language as a well-being indicator similar to others like vision, hearing, and oral health.
- Review and update existing policies, procedures, and practices to proactively employ language as a well-being indicator through developmentally responsive intake, assessment, care planning, and discharge protocols.
- Implement a comprehensive approach to notice, monitor. screen, and enhance engagement within universal settings in the juvenile justice system and in preparation for court appearances. (Refer to the "What" toolkit to learn more.)



When children don't have language, their behavior becomes their language.



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Special thanks to Superintendent Fred Williams, MTSS, and Literacy Coordinator Jamie Thomas, and the rest of the administration and staff at Dublin City Schools for their leadership and collaboration. Their dedication was instrumental in the success of the creation of this approach that will support all children in Dublin City and beyond. Thank you also to the Governor's Office of Student Achievement and the Sandra Dunagan Deal Center for Early Language and Literacy for investing in this work.



