## Learning Difficulties Australia

Learning Difficulties Australia is an association of teachers and other professionals dedicated

to assisting students with learning difficulties through effective teaching practices based on

scientific research.





www.ldaustralia.org

enquiries@ldaustralia.org

@LearningDifficultiesAustralia





## Supporting mental health in the context of language and literacy difficulties.



**Professor Mark Boyes** 



Dr Lizz Hill







*"I have blond her, Blue eys and an infeckshos smill. But under the surface I live in a tumoyl. Words look like swigles and riting storys is a disaster area ... Thechers sead I was clevor but just didn't try. Uther boys made fun of me and so I beckame lonly and mishroboll"* 

(Alexander, 9 years)



- Approximately, what % of young people experience persistent and pervasive difficulties with language and literacy?
  - 10-15%
  - 1-5%
  - 20-30%
  - 60-75%



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- Approximately, what % of children with emotional and/behavioural problems have significant unidentified communication needs?
  - ≈ **10%**
  - <mark>≈ 80%</mark>
  - ≈ **50%**
  - ≈ **5**%



- Approximately, what % of children with diagnosed language and communication needs experience emotional and/or behavioural disorders?
  - ≈ 60%
  - 10%
  - 3%
  - ≈ 80%



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### **Key concepts: Communication**

'Communication' is:

- Not uniquely human
- An active process of encoding, transmitting, and decoding a message
- A system of different methods such as speaking, reading, writing, gesture, expression...





### Key concepts: Language

#### 'Language' is:

- ...complex
- Made up of 'receptive' (understanding) and 'expressive' (producing)
- Use of symbols to communicate and receive messages
  - Sounds, letters, drawings, gestures
- A rule-governed system:
  - Rules for sound/letter, word, and sentence combinations; rules for meaning

Rules are language dependent meaning they vary across languages and dialects

(language is not speech)



## The role of language in communication

#### Receptive language skills:

- Instructions
- Indirect requests, questions, or statements
- Direct requests
- Written information
- Understanding words for thoughts and feelings.

#### Expressive language skills :

- Word finding
- Clarity of expression
- Ordering of ideas
- Including relevant information: who, when, where, why, how, what...
- Difficulty describing thoughts and feelings





## Considering language and mental health...

#### **Social Interaction**

#### Language supports peer relationships and social interaction:

- Knowledge of 'rules' of interaction (e.g., conversation)
- Establishing common ground and shared interests
- Using humour, sarcasm, idioms, and non-verbal language
- Providing sufficient depth, detail, and relevance of information
- Identifying and repairing communication
   breakdown and misunderstanding



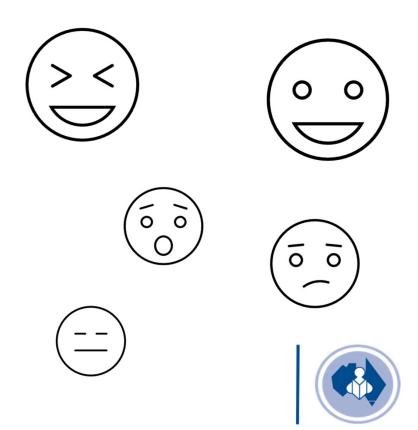


## Considering language and mental health...

#### **Emotion Regulation**

#### Language is critical for emotional regulation

- Identifying emotion
- Understanding emotion
- Describing emotion using correct vocabulary
- Understanding why or how you feel a particular way
- Identifying and interpreting others' emotions



## Considering language and mental health...

#### Academic engagement

#### Language underpins academic success

- Engaging with academic content
- Attending to information
- Demonstrating knowledge
- Participating in class discussions
- Asking for help
- Accessing and completing homework
- Forming links between and within subjects





## Considering co-occurring difficulties...

#### Memory, attention, and concentration

- Children with language / communication difficulties often have co-occurring poor working memory, reduced attentional capacity, and difficulties with sustained concentration
  - Prone to distractions
  - Require repetition of information or requests
    - May not have the language to request
  - Difficulty engaging in the classroom
  - Attending in conversation
    - 'Keeping up'
    - May not have the skills to repair breakdown





#### Negative behaviours in children with oral language difficulties...



I don't understand what you want me to do

> I can't understand my feelings or do anything about them

#### Common Language and Literacy Disorders

- Developmental language disorder (DLD; previously known as Specific Language Impairment)
- Autism Spectrum Disorder
- Specific Learning Disorders:
  - Dyslexia
  - Dysgraphia
  - Dyscalculia
- Fluency disorders (stuttering, stammering)
- Articulation and phonological disorders (e.g., Apraxia of speech, speech sound disorder)
- Language / literacy difficulties related to intellectual or other neurodevelopmental disabilities or difficulties



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# Links between Language and Mental Health

- Well-established link between language and literacy difficulties / disorder and:
  - Conduct problems
  - Socio-emotional difficulties
  - Externalising behaviour
  - Internalising behaviour
  - Suicidal ideation
  - Poor parental / carer mental health

Links are pervasive and persist into late adolescence and adulthood...

(SPA, 2018)



#### Oral Language Difficulties & Mental Health

We acknowledge the contribution of Associate Professor Suze Leitao to the development of this content



## **Developmental Language Disorder**

- Two children in every Australian classroom have DLD
- Emerges in early childhood
- DLD has been known as: expressive-receptive language disorder, speechlanguage disorder, specific language impairment
- Not associated with: a lack of exposure to language, neurodevelopmental difficulties, intellectual disability, hearing problems, or cognitive impairment
- A 'hidden' difficulty
- Often mistaken for a problem with behaviour or attention
- It's a lifelong condition that has persistent impact on emotional wellbeing, social relationships, academic outcomes, vocational opportunities



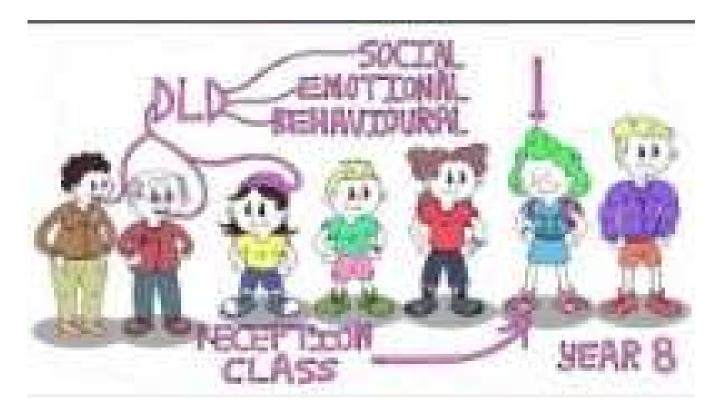
## Signs of DLD

#### A child or adolescent with DLD is likely to:

- struggle to find the words to express ideas
- have trouble organising sentences, having conversations or telling a story
- find it hard to understand words, follow instructions or answer questions
- not remember what someone has said
- have difficulty paying attention
- ...and, have difficulty reading and writing



#### **DLD and Mental Health**





https://www.youtube.com/watch?v=-orJLnCgGJw

### **DLD and Mental Health**

- The rate of problem behaviours tends to increase as the child grows older (Curtis et al., 2018).
- Risk factors:
  - More severe language difficulties
  - Family history of poor mental health
  - Poor peer relationships

#### Protective factors include:

- A hopeful outlook
- A strong sense of agency / self-efficacy
- Positive relationships with peers and adults (Lyons et al., 2018)



#### **DLD and Mental Health: Advocacy!**

Norbury, C., Griffiths, S., Goh, S. K. Y., Boyes, M., Hill, E., & Viding, E. (2024). Developmental language disorder: a hidden condition. The Lancet Child & Adolescent Health.

Commen

#### Developmental language disorder: a hidden condition

Developmental language disorder (DLD) is the consensus term for neurodivergence characterised by challenges with speaking and listening that restrict communication. Difficulties with speaking might manifest as delayed early language milestones, saying less overall, and use of simple sentences with reduced vocabulary, which are difficult for listeners trying to follow the child's intended meaning. Problems with understanding can appear as not listening, not following directions, misunderstanding what others say, or rapidly forgetting what has been said. The term DLD was agreed by individuals and families with lived

affected individuals and society. Many young people Loncet Child Adolesc Health 2024 with DLD experience increasing anxiety as they approach adolescence, due to the increasing language demands of the school curriculum and peer relationships (figure). They describe the constant struggle of trying to keep up with lessons and conversation, often trying to mask their difficulties by nodding and agreeing even when they don't understand, or withdrawing from social situations in which they might be exposed, including school.6

Prospective longitudinal studies indicate that children identified as having DLD have a 1-8-2-3-fold higher



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## Mental health and LD: Parent perspectives

## Access and/or engagement in mental health support impacted by:

- (1) a poor availability of mental health care services/professionals;
- (2) a lack of professional/specialist knowledge about language, literacy, and mental health
- (3) the inaccessibility of traditional methods of therapy (e.g., one-on-one talk therapy);
- (4) funding constraints
- (5) Children are already inundated with language-related appointments (e.g., speech pathologist)

"I feel like every second day we were in therapy and I'm like poor kids seeing more office spaces than he does outside." – Parent 3



 "I want someone [MH professional] who actually knows DLD ... I don't want to have to go through explaining it and have to educate them on it before they look at these concerns, and I really want to sort of separate, okay, this has something to do with her language, or no, this has something to do with what she's seen at home...Because I do have two elements here which I'm not sure which one relates to or if it's a combination of both. So, I really, I'm seeking out that psychologist that knows that because that's valuable really at this stage." – Parent 1



## Language difficulties & MH

Secured funding to explore modifiable third factors associated with mental health in children with language disorder

#### AND

Co-design accessible mental health program tailored to their preferences and priorities

Want to get involved? Scan QR code to enter your details:





#### **Reading Difficulties & Mental Health**



C "I realised I actually wasn't dumb"

P "she would cry every night, she would lack confidence in anything that she did. (H)er whole world centred around trying to find something that she was good at... So she'd put a lot of focus and effort on that..."

C "... the hardest part of my life I reckon so far ... so he was bullying me at the time when I was finding out I was dyslexic or not".

P "... XX refuted the diagnosis of the XX, basically just said, "No, look, this is – I don't agree with this. He's not dyslexic." He was actually sent out of Special Ed, back into the classroom. "

P "(I)ronically, you don't get extra funding for a diagnosis of dyslexia but hey, you get it for depression and anxiety. So you've got to get so bad that you do end up with significant mental health problems before you can actually get extra funding, well the school can get extra funding."

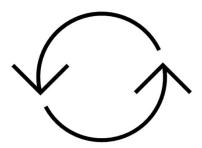


#### Dyslexia

Approximately 10-15% of young people have dyslexia. These children have difficulty:

- Learning relationships between letters and sounds
- Blending sounds to decode words (guessing)
- Reading quickly, reading out loud
- Understanding what they've read
- With working memory





#### Reading and Externalising Behaviour

- ADHD and Behaviour
- 15-40% of children with reading difficulties meet criteria for ADHD
- Poor readers show elevated levels of attentional problems,
  - More inattention, less hyperactivity
- Reading difficulties clearly linked to conduct and behavioural problems into adulthood
  - Evidence suggests inattentiveness accounts this relationship
- Relationship between reading and difficulties with attention is complex
- ... reading difficulties do not reflect only problems with attention





#### Reading and Internalising Symptoms

- Consistent associations between reading difficulties and symptoms of anxiety and depression in children and adolescents
- Both in terms of raw questionnaire scores and the likelihood of scoring above "clinical threshold"
  - Inconsistent for parent/teacher report...harder to 'see'?
- Unlike externalising, not due to attentional problems
- Associations between reading and anxiety are not attributable to shared family risk, but are specifically linked to reading difficulties







#### Reading and Child Mental Health

Consistent links between reading difficulties and externalising and internalising symptoms in children and into adulthood



#### ..... but why do these links exist?



## **Risk and Protective Factors: Broader literature**

The broader psychology literature gives us some clues

- Generally, child mental health associated with:
  - Low self-esteem
  - Peer relationship problems
  - Bullying victimisation
  - Difficulties in emotion regulation
  - Ineffective coping strategies
  - Poor social skills
  - Academic failure
  - Poor school connection
  - Difficulties with teacher relationships
  - Family and sibling relationships



Shared by children with dyslexia



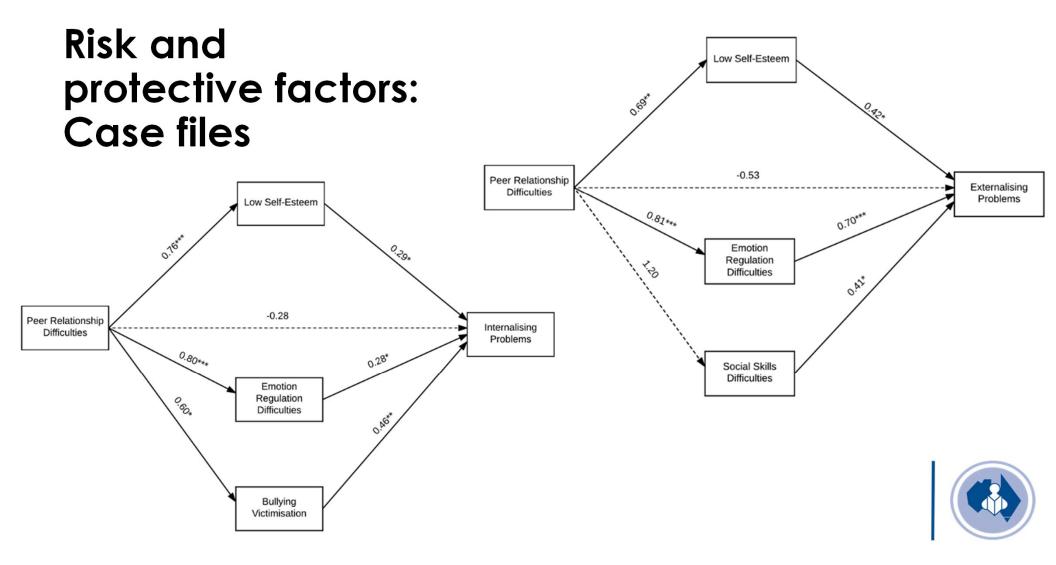
### **Risk and Protective Factors: Case files**

- Collaboration with Dyslexia-SPELD Foundation extracted data from 450
   casefiles
  - Literacy skills, cognitive abilities
  - Behavioural and socio-emotional development
- Relatively high rates of difficulties
  - Low self-esteem ~ 25%
  - Behavioural problems ~ 25%
  - Emotional problems ~ 10%
- Majority of children had not experienced any difficulties









### Risk and Protective Factors: Summary

For children with dyslexia, internalising and externalising symptoms associated with:

- Self-esteem
- Bullying
- Emotional regulation
- Social skills and peer relationships
- ... could be targets for intervention!





### **Clever Kids: Overview**

- Nine weekly sessions
- Focus on self-acceptance, positive coping strategies, goal setting, perseverance and help-seeking behaviours
- Combination of explicit instruction, modelling, role-play and ongoing revision of the concepts being taught

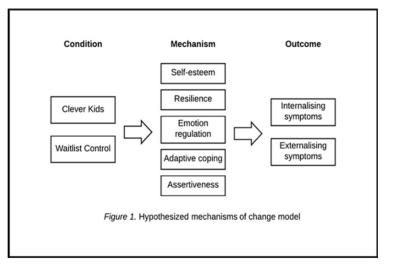




### **Clever Kids: Evaluation**

Piloted the feasibility, efficacy, and acceptability of 'Clever Kids'

- **Feasibility** Recruiting and maintaining participants in a RCT
- **Efficacy** Improvements in targeted mechanisms, internalising and externalising symptoms
- <u>Acceptability</u> Enjoyment and perceived utility, detailed qualitative feedback





## **Clever Kids: Evaluation**

Dyslexia - SPELD Foundation LITERACY & CLINICAL SERVICES

Mixed-methods pilot evaluation

 $\circ$ Small (*n* = 40) randomised-controlled trial (waitlist control)

- Assessments at 3 time points
- Well-validated and widely used measures of constructs of interest
  - Perceived enjoyment and usefulness of each session
  - Monitored homework completion rates

oNo cost to attend program

- Reimbursement: Children received \$50 voucher

 $\circ$ Focus group (*n* = 5) with children who completed the program

- Reimbursement: Children received \$20 voucher



### **Clever Kids: Feasibility**

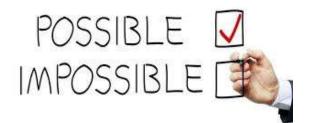
Achieved target sample by emailing parents in DSF database

24% response rate

Retention throughout the trial was excellent

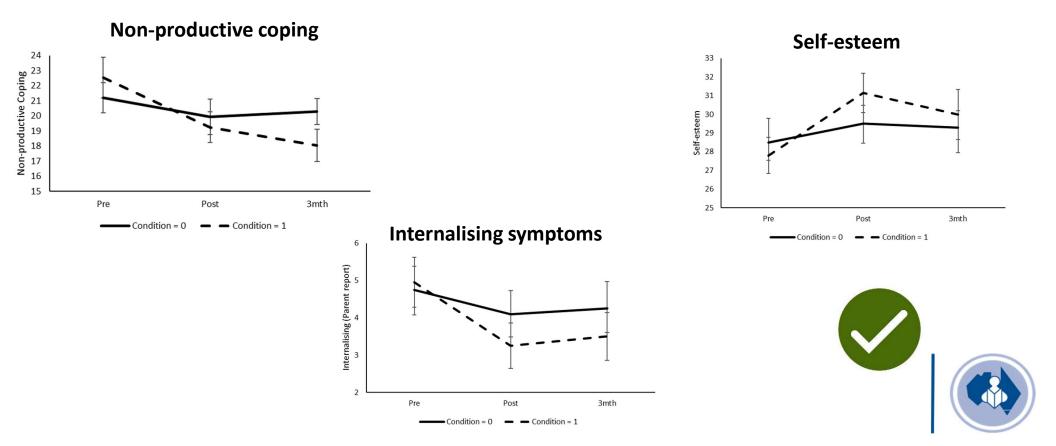
No difficulties with randomisation

Excellent program attendance

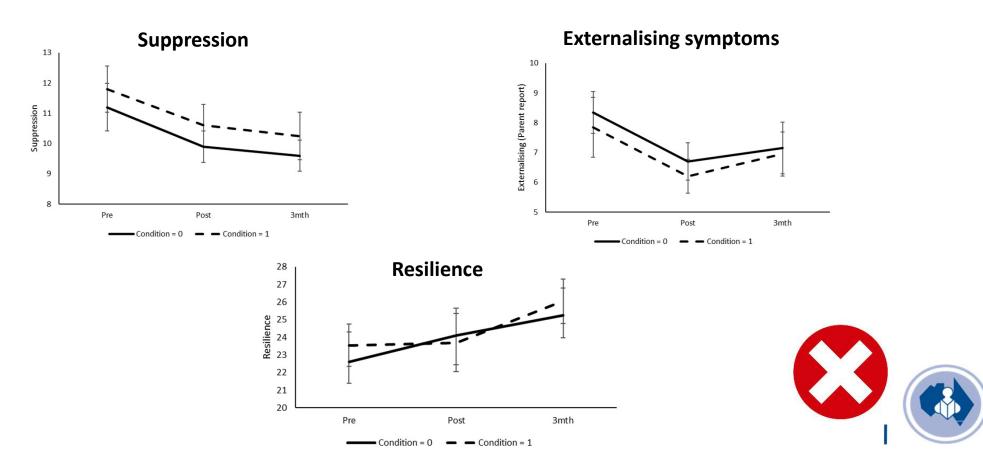




### **Clever Kids: Efficacy**



### **Clever Kids: Efficacy**



# **Clever Kids: Acceptability**

- All sessions rated as enjoyable and useful
- Homework completion rates ~61% (but variable)

### • <u>Liked</u>

Meeting other children struggling with reading
Drawing, movement, bodily-focused activities

### • <u>Did not like</u>

o Sitting at tables, reading, writingo Homework







### **Clever Kids: Limitations**

- Free program attendance and participant reimbursement
- Underpowered? Need for larger trial
- 'Clever Kids' does not include a literacy support component
- Problem-solving, assertiveness, help-seeking ... ?





### **Clever Kids: Conclusions**

- Clear parent demand for programs addressing emotional wellbeing
- Feasibility of further evaluation in larger trials

#### Improved coping skills

Additional improvements in socio-emotional wellbeing?

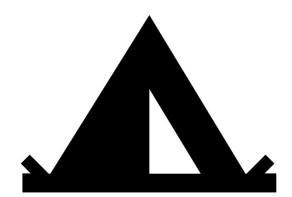
#### Acceptable to children and families

- Shorter sessions or more breaks
- o Further reducing activities involving reading/writing

British Journal o	
Educational	
Psychology	
The second	



### **Clever Kids....The Camp!**





### **Implications for Practice**



### **Implications for Practice**

Approximately 7% to 15% of young people will have a diagnosed language or literacy difficulty (e.g., DLD, dyslexia)

We need to think about:

- The impact of language / literacy on mental health, and vice versa
- How we can accommodate for language and literacy difficulties in the classroom
- The impact of language and communication difficulties on insight and selfawareness



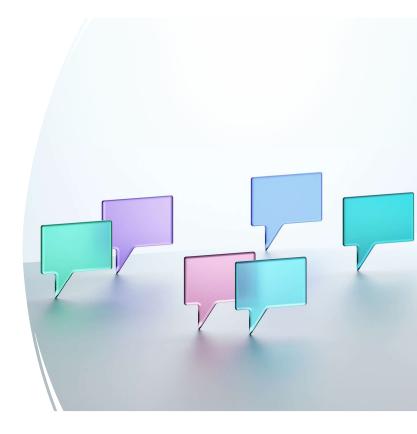
### Language demands of mental health support?

- "What brought you here?"
- "What happened?"
- "How does that make you feel?"
- "Why do you feel that way?
- "How would your friend feel about that?"



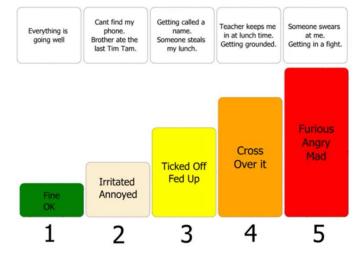
### Support & scaffold communication

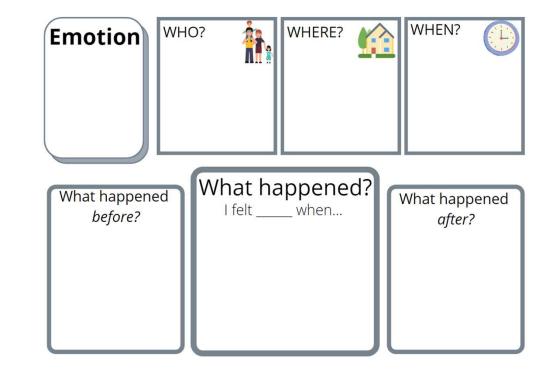
- Pictures, gesture, and demonstrations to support understanding
- Sit face-to-face
- Use simple language
- Reduce speech rate (but not too much)
- Use 'active tense'
- Allow plenty of time to process and respond
- Use short instructions, repeat, and explain
- Use 'Teach Back' strategies to check understanding





#### **Pissed Off Scales**





day what happened? v	/hat did I do? how did I feel?
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# Collaboration is key

- Enquire about language and literacy development
  - Parent report
  - Teacher report
- Enquire about history of speech pathology
- Are they seeing a SP? Consider collaborating on language and literacy requirements of MH support (with consent)
  - Vocabulary, narrative storytelling, conversation skills
- Know when to refer on...



### Resources

- Annotated bibliography
- Raising Awareness of DLD (RADLD): <a href="https://radld.org/">https://radld.org/</a>
- Dyslexia-SPELD Foundation: <u>https://dsf.net.au/</u>
- Speech Pathology Australia
  - What is a speech pathologist

https://www.speechpathologyaustralia.org.au/SPAweb/Resources\_for\_the\_Public/What\_is\_a\_ Speech\_Pathologist/SPAweb/Resources\_for\_the\_Public/What\_is\_a\_Speech\_Pathologist/What\_i s\_a\_Speech\_Pathologist.aspx?hkey=7e5fb9f8-c226-4db6-934c-0c3987214d7a

• Find a speech pathologist

https://www.speechpathologyaustralia.org.au/SPAweb/Resources\_for\_the\_Public/Find\_a\_Speech\_Pathologist/SPAweb/Resources\_for\_the\_Public/Find\_a\_Speech\_Pathologist/Find\_a\_Speech\_Pathologist.aspx?hkey=0b04c883-80b2-43e7-9298-7e5db5c75197

- Teach Back: <u>http://teachback.org/</u>
- 'Participics' <u>https://portal.peeristics.com/public/participics</u>



#### Stay up to date with our work

### Where to next?

- Transition to high school study (currently underway) Flyer attached, please share!
- Larger trial of Clever Kids (currently underway)
- Mental health program for children with oral language difficulties (currently underway)
- Parent mental health?
- Collaborating on trials of school-wide interventions?
- Transition to university?
- What do you think should be priorities? mark.boyes@curtin.edu.au elizabeth.hill@curtin.edu.au





Share your perspectives of the socio-emotional wellbeing of children and young people who have language or reading difficulties

Your insights can make a difference!



We're looking for Australian teachers and teacher assistants who work with children who have language or reading difficulties.

You can help Curtin University researchers to learn more about the school experiences and socio-emotional wellbeing of children who have language or reading difficulties by participating in a focus group of approx. 1.5-2 hour duration. Online or in-person focus groups available.

For more information or to register your interest scan the OR code

Or contact Dr Adie Wilmot

adie.wilmot@curtin.edu.au

Curtin University HREC approved study (HRE2021-0084)



# Thanks!

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