## **Developmental Language Disorder: Have you heard of it?**

You might think that a condition that affects 7.5% of school age children (that's on average 2 children in every classroom) would be one that most of us would have heard of. Yet despite being more common than autism, Developmental Language Disorder (DLD) remains poorly known about by members of the general public, and also staff that work with children. Those who receive a diagnosis often feel isolated and alone because of the lack of awareness but also support.

DLD is a neurodevelopmental disorder, present from childhood, that significantly impacts learning, understanding, and using spoken language. DLD describes a child who has not developed language to the expected degree for their age, leading to difficulties in understanding, formulating, or expressing thoughts and ideas, impacting their overall communication skills, despite adequate opportunity and no clear biological reason (for example, a known genetic syndrome, such as Down's Syndrome). Characteristics of DLD include difficulties with understanding instructions, word finding problems, and poor vocabulary, and language impairments often also impact children's reading development and social interactions.

So why is DLD so poorly known about, compared to other neurodevelopmental conditions, like autism or ADHD?

Firstly, "DLD" is a relatively new term, it only really came about in 2017 when a group of experts (e.g., researchers & speech pathologists) arrived at this term after a consensus-building exercise to identify a criteria and terminology that would be most appropriate. This was decided after many decades of multiple terms being used to describe the same group of children. Previous terms included expressive-receptive language disorder, specific language impairment, speech-language impairment, and language delay to name a few. This inconsistency in the label for DLD has contributed to poor awareness amongst the public, but also impacts access to education, speech therapy and involvement in research. By using the same term, we can increase awareness of DLD, and more clearly document the level of need for different services.

Secondly, DLD is a hidden condition: many adults assume that they will be easily able to hear when a child has a language problem, but this is because speech versus language problems are often conflated. Language is complex and is made up of a number of overlapping elements; phonology, morphology, syntax, semantics and pragmatics, each of which may be impacted in DLD. Speech refers to the articulation of spoken language - it is affected in some with DLD, but a child can have good articulation (no lisps, no stammering) but still have profound difficulties with their language skills. While there are some common characteristics of DLD, people with

DLD have different strengths and weaknesses across areas of language, and their relative areas of strength and weakness may fluctuate overtime.

The hidden nature of DLD links to our final reason why DLD may have remained relatively under-recognized. Emerging evidence suggests that children and young people with language problems may camouflage or mask their difficulties. Recent work has documented masking by autistic people: this is where an autistic person (consciously or unconsciously) does things that may mean they appear non-autistic to others. This also seems to happen in DLD: young people camouflage their communication difficulties, for example by copying others, avoiding interactions or environments that are linguistically demanding for them (for example by choosing forms of play or playmates with lower language demands), or steering the topic of conversation to things they're familiar with and where they know the vocabulary. Camouflaging that successfully covers up a person's language needs might mean adults in the child's environment do not recognise the language problems being experienced by that child

Organisations like RADLD, E-DLD and NAPLIC are working hard to improve awareness of DLD, to help more children have their language needs spotting, diagnosed and appropriately supported. However, we still have much research to do to better understand how to support people with DLD to have positive outcomes. These positive outcomes are not just about improving individuals' language and communication skills (in fact, while speech and language therapy can be hugely beneficial, DLD is a lifelong condition and cannot be "cured" via speech and language therapy): we know that young people with DLD are at an increased risk of poor mental health, poorer sleep patterns, and that language problems are highly elevated in young offender institutions, and children facing exclusion from school.

We need more research that helps us make spaces in society communication friendly, ready to spot and support young people with DLD at any age, given that many may miss out on a diagnosis in their early schooling.

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## Want to Read More?

CATALISE: A multinational and multidisciplinary delphi consensus study. Identifying Language Impairments in children. <u>Bishop D.V.M., Snowling M.J., Thompson P.A., Greenhalgh T. & the CATALISE consortium (2016)</u>

Phase 2 of CATALISE: A multinational and multidisciplinary delphi consensus study of problems with language development: Terminology. <u>Bishop, D. V.M., Snowling, M. J., Thompson, P. A., Greenhalgh, T. & the CATALISE-2 Consortium (2017)</u>

Victimization, bullying, and emotional competence: Longitudinal associations in (pre) adolescents with and without developmental language disorder. <u>van den Bedem, N. P. Dockrell, J. E., van Alphen, P. M., Kalicharan, S. V., & Rieffe, C. (2018)</u>

Camouflaging in Developmental Language Disorder: The Views of Speech and Language Pathologists and Parents. <u>Hobson, H. M., & Lee, A. (2023)</u>