Enhancing Language, Communication, Educational Outcomes and the Health and Wellbeing of Children and Young People with Developmental Language Disorder

Professor Victoria Joffe, University of Essex
Svensk Intresseforening for Tal & Spak, Stockholm, Sweden
23rd October 2026

A. Introduction: Why Language Matters

Language underpins almost every aspect of human development. It provides the foundation for learning, social relationships, participation in everyday activities, emotional wellbeing, and future employment opportunities. Yet language is often invisible within education and health systems, with its central role in supporting learning and participation frequently underestimated. This keynote explored how speech and language therapists, educators and families can work together to improve outcomes for children and young people with Developmental Language Disorder (DLD), drawing on current research and examples of evidence-based practice.

DLD is one of the most common neurodevelopmental disorders, affecting approximately 7% of children (Bishop et al., 2017; Norbury et al., 2016). Children with DLD experience persistent difficulties in understanding and/or using spoken language that significantly affect everyday functioning. These difficulties may involve vocabulary, grammar, syntax, narrative skills, language comprehension and social communication. Importantly, DLD cannot be explained by a known biomedical condition and often occurs in children who otherwise appear to be developing typically.

A central theme throughout the presentation was that language difficulties should not be viewed as isolated impairments. Rather, they have significant implications for academic attainment, social relationships, emotional wellbeing and long-term life opportunities. Longitudinal studies consistently demonstrate that DLD can have lifelong consequences if left unsupported, affecting educational achievement, employment outcomes, social participation and mental health into adulthood (Conti-Ramsden et al., 2018; Eadie et al., 2018; Johnson et al., 2010).

Understanding DLD therefore requires a shift in perspective. The goal is not simply to improve language skills in isolation, but to enhance participation, inclusion and quality of life. Effective intervention should ultimately enable children and young

people to access learning, form meaningful relationships, develop confidence and participate fully in society.

B. Evidence-Based Support Across Universal, Targeted and Specialist Provision

Supporting children and young people with DLD requires a continuum of provision that incorporates universal, targeted and specialist approaches. These levels should not be viewed as separate systems but as interconnected and mutually reinforcing components of effective service delivery.

Universal provision aims to create communication-supportive classrooms and wider environments for all learners (for example, Dockrell et al., 2012). Given the fundamental role of language in learning, all educational settings, home and wider contexts should consider how they support listening, understanding, vocabulary learning and classroom/group participation (Beck et al., 2013). Universal strategies include explicit vocabulary teaching, communication-friendly classrooms, structured discussion opportunities and the use of visual supports. These approaches benefit all learners but are particularly important for children with language vulnerabilities.

Targeted interventions provide additional support for children at risk of language and communication difficulties. Examples discussed during the keynote included interventions focusing on vocabulary development, narrative skills and social communication. Such programmes often involve small-group teaching, are time limited, and can be delivered effectively by appropriately trained school staff.

Specialist interventions are designed for children and young people with more significant or persistent language difficulties. Programmes such as Shape Coding (Ebbels, 2007), Building Early Sentences Therapy (BEST) and Complex Sentence Intervention (Balthazar & Scott, 2018) provide explicit, structured teaching of grammatical and syntactic skills that are often particularly challenging for learners with DLD.

A key message of the presentation was that all levels of intervention contribute to positive outcomes and that children and young people frequently require support across multiple levels simultaneously. Effective services therefore involve not only direct therapy but also capacity-building within educational settings and support for those who interact with children daily.

C. What Does the Evidence Tell Us About Effective Intervention?

A major focus of the keynote was the growing evidence that intervention remains effective throughout childhood and adolescence. Historically, much language intervention research focused on preschool and primary-aged children, leading to assumptions that intervention becomes less effective as children grow older. Increasing evidence challenges this view.

The Enhanced Language and Communication in Secondary Schools (ELCISS) study provides important evidence that adolescents with language disorder continue to benefit from intervention. In this large-scale randomised controlled trial, secondary school students received structured vocabulary and narrative interventions delivered by trained teaching assistants within mainstream schools (Joffe et al., 2019). The findings demonstrated significant gains in storytelling ability, vocabulary knowledge and understanding of figurative language. Importantly, the study showed that intervention can be successfully embedded within educational settings and delivered by trained school staff working in partnership with speech and language therapists.

The presentation also highlighted evidence supporting curriculum-based vocabulary interventions. Vocabulary knowledge is strongly associated with literacy, educational attainment and curriculum access. Programmes such as Word Discovery demonstrate that when teachers provide explicit instruction in word meanings, word-learning strategies, semantic relationships and morphological awareness, students can make meaningful gains in vocabulary knowledge and confidence as learners (Lowe et al., 2018; Lowe et al., 2019).

Although individual intervention programmes vary in content and delivery, successful approaches share several common characteristics. They provide explicit teaching, repeated opportunities for practice, meaningful application of skills and opportunities for generalisation across contexts. Effective interventions are also underpinned by strong collaboration between therapists, educators and families, ensuring that language-learning opportunities extend beyond therapy sessions into everyday environments.

An important consideration highlighted throughout the presentation was that intervention success should not be evaluated solely through standardised tests. While improvements in language measures are important, equally important are broader outcomes such as participation, confidence, independence and educational engagement and participation. Ultimately, the effectiveness of intervention depends upon whether language gains support meaningful improvements in children's everyday lives.

D. Creating Participation, Inclusion and Wellbeing Through Collaborative Practice

The final section of the keynote focused on participation and wellbeing as the ultimate goals of intervention. Contemporary models of practice increasingly emphasise that successful outcomes are achieved not simply through changes in impairment-level skills but through enhanced participation within real-life contexts.

Children and young people with DLD often experience challenges understanding classroom instruction, participating in discussions, developing friendships and expressing their views. Consequently, creating communication-accessible environments is as important as delivering specific interventions. Strategies such as reducing linguistic complexity, slowing the rate of speech, providing visual supports, checking understanding and allowing additional processing time can substantially improve access to learning and participation.

Visual supports were highlighted as particularly valuable tools for promoting understanding and reducing cognitive demands. These may include visual timetables, graphic organisers, narrative frameworks, concept maps, symbols and Talking Mats®. Such approaches help make spoken language more accessible and support children in expressing their views and participating in decision-making.

The presentation also emphasised the importance of involving children and young people as active partners in intervention. Person-centred practice requires that individuals understand their strengths and challenges, contribute to goal setting and evaluate their own progress. Developing self-awareness and self-advocacy skills becomes particularly important during adolescence as young people prepare for transitions into further education, employment and adulthood. However, these skills should be developed and enhanced early in development to ensure they are embedded and used across contexts.

Underpinning all of these approaches is a commitment to collaborative practice. Drawing on ecological models of development, the keynote argued that language development occurs within interconnected systems that include families, schools, communities and health services. Consequently, speech and language therapists have a vital role not only in delivering intervention but also in supporting others to create communication-supportive environments. Sustainable change is most likely to occur when children, families, educators and therapists share responsibility for achieving common goals.

E. Conclusion: Language as a Foundation for Life

The overarching message of this keynote was that language matters because it underpins learning, relationships, participation, health and wellbeing throughout the lifespan. Developmental Language Disorder is common, persistent and associated with significant risks, yet there is now a substantial and growing body of evidence demonstrating that effective intervention can make a meaningful difference.

Children and young people with DLD benefit from a continuum of support that includes universal, targeted and specialist provision. Evidence demonstrates that intervention remains effective beyond the early years, including throughout adolescence, particularly when it is embedded within educational contexts and delivered through collaborative partnerships.

Perhaps most importantly, the keynote emphasised that the ultimate purpose of intervention is not simply improved performance on language tests. Success should be measured by whether children and young people can participate more fully in education, and in their home and social lives, develop stronger relationships, advocate for themselves, experience positive wellbeing and achieve their aspirations. Language is not an end in itself; it is a means through which children and young people engage with the world. Supporting language development therefore means supporting participation, opportunity and quality of life, and is completely within the remit of the speech and language therapist.

F. Key References

Balthazar, C. H., & Scott, C. M. (2018). Targeting complex sentence comprehension and production in school-age children with developmental language disorder. American Journal of Speech-Language Pathology, 27(3), 1069-1083. https://doi.org/10.1044/2018_AJSLP-17-0102

Beck, I. L., McKeown, M. G., & Kucan, L. (2013). Bringing words to life: Robust vocabulary instruction (2nd ed.). Guilford Press.

Bishop, D. V. M., Snowling, M. J., Thompson, P. A., Greenhalgh, T., & CATALISE Consortium. (2017). Phase 2 of CATALISE: A multinational and multidisciplinary Delphi consensus study of problems with language development. Journal of Child Psychology and Psychiatry, 58(10), 1068-1080. https://doi.org/10.1111/jcpp.12721

Bronfenbrenner, U. (1979). The ecology of human development: Experiments by nature and design. Harvard University Press.

Conti-Ramsden, G., Mok, P. L. H., Pickles, A., & Durkin, K. (2018). Adolescents with a history of developmental language disorder: Strengths, difficulties and mental health outcomes. Journal of Child Psychology and Psychiatry, 59(11), 1191-1199.

Dockrell, J. E., Bakopoulou, I., Law, J., Spencer, S., & Lindsay, G. (2012). Communication Supporting Classroom Observation Tool (CSCOT). London: Better Communication Research Programme.

Eadie, P., Conway, L., Hallenstein, B., Mensah, F., McKean, C., & Reilly, S. (2018). Quality of life in children with developmental language disorder. International Journal of Language & Communication Disorders, 53(4), 799-810.

Ebbels, S. H. (2007). Teaching grammar to school-aged children with specific language impairment using Shape Coding. Child Language Teaching and Therapy, 23(1), 67-93.

Gascoigne, M. (2006). Supporting children with speech, language and communication needs within integrated children's services. RCSLT.

Joffe, V. L., Rixon, L., & Hulme, C. (2019). Improving narrative and vocabulary skills in secondary school students with language disorder: A randomized controlled trial. International Journal of Language & Communication Disorders, 54(4), 656-672. https://doi.org/10.1111/1460-6984.12459

Johnson, C. J., Beitchman, J. H., & Brownlie, E. B. (2010). Twenty-year follow-up of children with and without speech-language impairments: Family, educational, occupational and quality of life outcomes. American Journal of Speech-Language Pathology, 19(1), 51-65.

Law, J., Charlton, J., Dockrell, J., Gascoigne, M., McKean, C., & Theakston, A. (2017). Early Language Development: Needs, provision and intervention for preschool children from socio-economically disadvantaged backgrounds. Education Endowment Foundation.

Lowe, H., Henry, L. A., & Joffe, V. L. (2018). The efficacy of a classroom-based vocabulary intervention for adolescents with language disorder. Child Language Teaching and Therapy, 34(3), 291-308.

Lowe, H., Henry, L. A., & Joffe, V. L. (2019). The effectiveness of classroom vocabulary intervention for adolescents with developmental language disorder. Journal of Speech, Language, and Hearing Research, 62(8), 2829-2846.

Norbury, C. F., Gooch, D., Wray, C., Baird, G., Charman, T., Simonoff, E., & Pickles, A. (2016). The impact of nonverbal ability on prevalence and clinical presentation of language disorder: Evidence from a population study. Journal of Child Psychology and Psychiatry, 57(11), 1247-1257. https://doi.org/10.1111/jcpp.12573

Tomblin, J. B., Records, N. L., Buckwalter, P., Zhang, X., Smith, E., & O'Brien, M. (1997). Prevalence of specific language impairment in kindergarten children. Journal of Speech, Language, and Hearing Research, 40(6), 1245-1260.

Van den Bedem, N. P., Dockrell, J. E., Van Alphen, P. M., & Rieffe, C. (2018). Emotional competence in children and adolescents with developmental language disorder. Clinical Child and Family Psychology Review, 21(4), 543-566.

Whitehurst, G. J., Falco, F. L., Lonigan, C. J., Fischel, J. E., DeBaryshe, B. D., Valdez-Menchaca, M. C., & Caulfield, M. (1988). Accelerating language development through picture book reading. Developmental Psychology, 24(4), 552-559.

Wilmot, M., Botting, N., Durkin, K., & Conti-Ramsden, G. (2024). Long-term educational, employment and psychosocial outcomes associated with Developmental Language Disorder. International Journal of Language & Communication Disorders, 59(1), 3-18.