Language Difficulties in Children and Young People in Care Aged 5 to 14 Years

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Abstract

Background: It is recognised that children and young people in care (aka, looked-after children and young people - LACYP) persistently demonstrate poor developmental trajectories in many areas, including their language (Krier et al., 2018; O'Higgins et al., 2015; Bazalgette et al., 2015). It is also established that their poor life trajectories are influenced by their pre and in-care adverse life experiences (Coman & Devaney, 2011; Mathers et al., 2016; Aguilar-Vafaie et al., 2011; Jones et al., 2011). However, to date, the language difficulties of the LACYP population have not received much attention, which may leave this population to live with undetected language difficulties throughout their life span. The current study thus explores the language difficulties in children and young people in care in the broader context, including the link between their educational attainment and social, emotional behavioural difficulties.

Method: A mixed methods design was used, with the qualitative strand providing complementary and explanatory data to the quantitative strand. The quantitative dataset was from an inner London borough, involving n=78 LACYP (aged 5-14) who resided in various out-of-home-care settings. A thematic analysis of interviews with n=31 professionals was conducted to provide supplementary data regarding language difficulties in this population.

Outcomes & Results: The study found that LACYP are at a higher risk of having poor language skills across all aspects of language, including social pragmatics and verbal cognition. Further findings suggested that LACYP with language difficulties are at risk of having poor educational, social, emotional and behavioural outcomes.

Conclusion: Findings suggest that early speech and language therapy assessments should be available to children and young people in care from the onset of their care journeys, with interventions implemented for those found to have language difficulties.