



Senedd Cymru Children, Young People and Education Committee inquiry on Children and Young People on the margins

Thank you for the opportunity to give written evidence as part of the committee's inquiry on Children and Young People on the margins. Our response is based on discussions with our members working in youth justice teams, schools for children with social, emotional and mental health difficulties and pupil referral units across Wales. We seek to address the inquiry terms of reference around children and young people at risk of criminal exploitation.

Key points

- Vulnerable children are at high risk of experiencing difficulties with speech, language and communication.
- Without support, these difficulties can compound the child's vulnerability, putting them at increased risk of mental health difficulties, exclusion from school and involvement in the criminal justice system.
- Early intervention to support children's speech, language and communication, can reduce the development of other vulnerabilities, but these opportunities are often missed.
- There are examples of good practice which recognise that vulnerabilities are inter linked and that supporting vulnerable children requires a joined up holistic approach to supporting children and families.
- Welsh Government should recognise the links between speech, language and communication needs and vulnerability in any statutory guidance on working with vulnerable children.
- Services for vulnerable children should receive training on the prevalence and impact of speech, language and communication needs, and consider the inclusion of speech and language therapists as part of multi-disciplinary teams to facilitate a more holistic approach to meeting children's needs.
- To bring strategic focus to this area, Welsh Government should extend the Talk with Me Programme to include school-aged children. The programme should continue to be led by speech and language therapists seconded into Welsh Government.

About the Royal College of Speech and Language Therapists (RCSLT)

RCSLT is the professional body for speech and language therapists (SLTs), speech and language therapy students and support workers working in the UK. The RCSLT has 20,000 members in the UK (650 in Wales) representing approximately 95% of SLTs working in the UK (who are registered with the Health & Care Professions Council). We support speech and language therapists by providing leadership, setting professional standards, facilitating research, promoting better education, and training.

Speech and Language Therapists (SLTs) are experts in swallowing and communication difficulties. We work across health, education, social services, and justice supporting people at every age and stage of life from neonates to people approaching the end of life.

SLTs are experts in supporting children and young people with speech, language and communication needs (SLCN) and training the wider workforce so that they can identify the signs of SLCN, improve communication environments, and provide effective support.

Inquiry terms of reference

Children and young people who are victims of criminal exploitation

1. Research shows that the groups of children recognised by the Committee as being vulnerable have something important in common in addition to their vulnerability: they are all at high risk of having speech, language and communication needs.
2. The term speech, language and communication needs (SLCN) encompasses a range of difficulties. While members of the public will often think of children who have difficulties with pronunciation (speech sounds) or stammering, in the cohort of vulnerable children, SLCN more commonly encompass difficulties understanding and remembering what is said to them, explaining and expressing themselves, or following the 'rules' of social interaction. In vulnerable children these needs often go unrecognised because behaviour and trauma can mask the difficulties a child or young person has communicating. For example, outbursts may be attributed to bad behaviour requiring punishment, rather than recognising that inadequate support of a communication need has led to an escalation in distress.

Table 1: Vulnerable children and speech, language and communication needs

Children with poor mental health	81% of children with emotional and behavioural disorders have significant unidentified language deficits; ⁱ 45% of young people referred to mental health services had a higher order language impairment (difficulties with understanding inference and abstract language). ⁱⁱ
Children at risk of or experiencing neglect or abuse	Children who have experienced abuse and neglect are more likely to have poor language and social communication skills than their peers. ⁱⁱⁱ
Children living in homes where domestic abuse is taking place	Children whose mothers experienced intimate partner violence (IPV) during the child's first four years had poorer language skills at age 10 than children whose mothers did not experience IPV. ^{iv}
Children living in homes	Exposure to maternal depressive symptoms, whether during the prenatal

where parents are suffering from mental ill health	period, postpartum period, or chronically, has been found to increase children’s risk for later cognitive and language difficulties. ^v
Children in the care system	In a study of young people aged 11 – 17 in residential care, 63% had speech, language and communication needs; none had previously been referred to speech and language therapy. ^{vi}
Children at risk of or experiencing criminal exploitation, for example involvement in gangs	At least 60% of young people in the UK who are accessing youth justice services present with speech, language and communication needs. ^{vii} Language plays a key role in creating and maintaining adolescent peer groups - children with difficulties in establishing positive peer relations are vulnerable to developing relationships with young people who are involved in antisocial or criminal activities. A recent report from the Gwent Police and Crime Commissioner (2020) discussed the correlation between vulnerability, criminality and exploitation of a group of children in Newport. Of the 13 children in the cohort, almost all of the children were found to have SLCN, and the majority of children referred to the YJS had SLCN to some degree. The report also identified that many children’s SLCN goes undiagnosed prior to the YJS’s screening process. 84% of young people coming through to Neath Port Talbot Youth Justice Service are showing a degree of Speech, Language and Communication need. Of the young people referred for a speech and language therapy assessment last financial year 95% had not had their needs identified prior to the involvement of the team.
Children additional learning and disabilities	33% of children in Wales with additional learning needs have speech, language, and communication needs (SLCN). SLCN is the most common type of learning need in Wales (Welsh Government, 2023).

3. While not specified as vulnerable group in the call for evidence, children and young people who have been excluded from school are also at higher risk of communication needs: data from a speech and language therapy service found that 63% of children excluded from mainstream schools had SLCN.^{viii}

Why does communication matter?

4. Communication is fundamental to children’s development, their achievement, wellbeing and future life chances. Successive governments has recognised that that speech, language and communication skills are a primary indicator of child wellbeing. Verbal cognitive ability appears to be a powerful protective factor, for example, reducing the likelihood of children developing conduct disorders in adolescence.^{ix}
5. Conversely, the impact of speech, language and communication difficulties can be to compound the child’s vulnerability, putting them at increased risk of other vulnerabilities during their childhood and throughout their lives, including mental health problems, exclusion from school, unemployment, and involvement in the criminal justice system. Professor Karen Bryan has described this as a compounding risk model, where low levels of language lead to other risks, such as low levels of educational achievement and literacy difficulties, which are in turn risk factors for mental health problems and offending.^x

6. As Professor Bryan points out, an advantage of a compounding risk model approach is that as each risk occurs there is a potential opportunity to intervene. But all too often these children fall through the cracks between services, not meeting the threshold for statutory support. Later these young people may reappear in the system when their needs have escalated to such an extent that they require support from mental health services or have become involved in the criminal justice system.
7. An additional element which further compounds the risk of poor outcomes for these children is that the very interventions which are commonly put in place to support them rely upon language and communication skills. For example, anger management, cognitive behavioural therapy and other talking therapies all place significant demand on language processes. Unless children's communication needs are identified and these interventions adapted, it is unlikely that they will be effective.^{xi} Instead, the young person may be inaccurately perceived as uncooperative or unwilling to engage, and in some cases denied access to the service in the first place.

Policy

8. As noted above, early intervention to support speech, language and communication can improve children's development and mitigate some of these compounding risks. Good speech and language skills can be the key which unlocks access to a range of other interventions that vulnerable children require.
9. Given the strength of evidence around SLCN of those at risk of offending, a focus is required on agencies in frequent contact with those most at risk of offending. We warmly welcomed the publication of the cross-Government Talk With Me Speech, Language and Communication (SLC); Delivery Plan 2020 – 2022. The focus of the current plan is on SLC skills and services for children in the early years, but it does include a number of broad actions around the youth justice system. The Talk with Me action plan, despite the pandemic, has made huge strides in relation to delivering on its aims to ensure that children throughout Wales have access to high quality universal, population, targeted and specialised support in the early years, if required, to develop their speech, language and communication skills. However, there is significant potential if the plan is to be extended to expand the age range of the plan and include direct actions on improving identification and support for children who are looked after, excluded from school, in contact with mental health services and youth justice services. A key element of this must include a greater focus on SLCN in teacher training and continuous professional development. We recommend the extension of the Talk With Me plan to an older age-group and the continued employment of speech and language therapists within government to drive delivery.
10. We also welcome recent early intervention initiatives being trialled within youth justice services in Neath Port Talbot and Cardiff. Analysis of school exclusion rates amongst pupils known to Cardiff Youth Justice Service has shown that 65% of pupils aged 16 or under receive fixed term or permanent exclusions from their educational setting and similar figures within Neath Port Talbot. The Speech and Language Therapists at Cardiff and Neath Port Talbot Youth Justice service have recently commenced a PRRE project (Promoting Reintegration and Reducing Exclusions). This project aims to identify any additional learning

needs for those young people identified by secondary schools as being at risk of school exclusions and managed moves to alternative provisions. The project will then enable children who are at greatest risk of school exclusions to be provided with appropriate support so that they can be assisted to remain in a setting on a full-time timetable, reducing the risk of children being exploited or becoming involved in offending.

11. The model is based on a project which has been in place within Milton Keynes Youth Justice Service since 2019. The Speech and Language Therapists will offer comprehensive assessments of the speech, language and communication needs of the pupils identified as being at risk of exclusion. Following this assessment a detailed report will be provided to the education setting, the young person and their family which will summarise any identified needs and suggest recommendations and resources to support this pupil. Training will also be offered to schools in order to upskill education staff in how best to support the communication needs of the pupil. Initially, a small number of secondary schools in Cardiff and Neath Port Talbot have been identified as a pilot for this project with the aim of the project being upscaled if successful. We are anticipating that a high proportion of the pupils assessed will present with SLCN as in April 2021-April 2022, Milton Keynes Youth Justice Service PRRE project identified that 96% of the pupils assessed within the PRRE project had identified SLCN. We believe it will be very important to closely monitor the findings from this project.

Senedd Equality and Youth Justice Committee work in this area

12. Recognising the high prevalence of young people with speech, language and communication needs within the criminal justice system as referenced above, in 2023 the Senedd Equality and Social Justice Committee held a spotlight inquiry on the speech, language and communication needs of young people within or at risk of involvement with the criminal justice system. The subsequent powerful '[60% Giving Them a Voice report](#)' made a number of clear recommendations which included;
 - That the Welsh Government should work with Police and Crime Commissioners through the Youth Justice Blueprint Programme Board to assess the feasibility of having dedicated NHS speech and language therapists working in custody suites at police stations with a view to embedding them across Wales in the medium term.
 - That the Welsh Government should work with local authorities to develop plans for embedding speech and language therapists within every Youth Offending Team in Wales.
13. Beyond improving support for young people with SLCN within the criminal justice system, the report also stressed the importance of prevention and reducing the high numbers of people with SLCN entering the justice system noting 'We want to improve awareness and early identification of SLCN by specialists working in frontline services, particularly schools.' The report included two key recommendations in this regard.
 - **Recommendation 1.** We recommend that the Welsh Government convene a summit of key stakeholders working in the sector with the aim of formulating a new workstream looking

specifically at the impact of SLCN on children and young people and the link to the involvement of most young people involved with the youth justice system. The summit and concomitant workstream should be finalised before the end of 2023 and include realistic actions, measurable targets, and a timeline for their completion within the All-Wales Justice Board forward work programme.

- **Recommendation 2.** The Welsh Government should set out in its response to this report how it intends to work with local education authorities, school leaders and governors and, where appropriate, local health boards, to ensure better understanding and awareness of SLCN in children and young people as they progress from primary to secondary school.
14. We believe there is a clear read across between these recommendations and the inquiry by the Children, Young People and Education Committee inquiry on Children and Young People on the margins.
 15. We were pleased to support the Welsh Government summit on this issue, in line with the Committee recommendation, in January 2024 but continue to await further detail on a much-needed workstream which we believe strongly requires realistic actions, measurable targets, and a timeline for their completion.
 16. We also influenced the recent Welsh Government [guidance](#) on attendance and have been pleased to see a section in the guidance on SLCN and references to the importance of the development of language and communication skills within nurture groups and the necessity to have clear systems in place to ensure children develop their speech and language skills to their full potential. However we remain concerned that there is insufficient strategic focus to drive change. As noted above, we recommend the extension of the Talk With Me plan to an older age-group and the continued employment of speech and language therapists to drive delivery.
 17. More broadly, we recommend that:
 - Statutory guidance for working with vulnerable children and young people should highlight the increased prevalence of speech, language and communication needs in the vulnerable group, and the impact of those needs on the children who have them.
 - All staff who work in services for vulnerable children, parents, guardians and families should receive training to understand the prevalence and implications of SLCN, the indicators that a child may have SLCN, simple steps they can take to support children with SLCN, and the specialist services that are available for those who need additional support.
 - Speech and language therapists should be embedded within or readily available to all relevant services for vulnerable children and young people, to enable them to provide training and advice to the team around the child, provide assessments and flexible, individualised support to those children that need it.
 18. The above recommendations should apply to all relevant services including:
 - Early help
 - Safeguarding teams
 - Family support

- Family social work
 - Adoption, looked after children and leaving care
 - Domestic abuse
 - Mental health support teams
 - CAMHS
 - Youth justice services including youth offending teams
 - Homelessness services
- **Further information**

19. We hope this paper will be helpful in supporting the committee discussions around Children and Young People on the margins. We would be happy to provide further information if this would be of benefit. Please see below our contact details.

Dr. Caroline Walters, External Affairs Manager (Wales), Royal College of Speech and Language Therapists
caroline.walters@rcslt.org

Confirmation

36. This response is submitted on behalf of The Royal College of Speech and Language Therapists in Wales. We confirm that we are happy for this response to be made public.

References

ⁱ Hollo, A. et al. (2014). Unidentified Language Deficits in Children with Emotional and Behavioural Disorders: A

Meta-Analysis. *Exceptional Children* 80(2): 169-186

ⁱⁱ Cohen, N., Farnia, F. and Im-Bolter, N. (2013). Higher order language competence and adolescent mental health. *Journal of Child Psychology and Psychiatry*, 54(7), 733-44.

ⁱⁱⁱ Sylvestre, A., Bussièrès, E. and Bouchard, C. (2015). Language Problems Among Abused and Neglected Children: A Meta-Analytic Review. *Child Maltreatment* 21(1):47-58;

Lum, J. A. G., Powell, M., & Snow, P. C. (2018). The influence of maltreatment history and out-of-homecare on children's language and social skills. *Child Abuse & Neglect*, 76, 65–74.

<https://doi.org/10.1016/j.chiabu.2017.10.008>

^{iv} Conway, L. J., Cook, F., Cahir, P., Brown, S., Reilly, S., Gartland, D., Mensah, F., & Giallo, R. (2021). Children's language abilities at age 10 and exposure to intimate partner violence in early childhood: Results of an Australian prospective pregnancy cohort study. *Child Abuse & Neglect*, 111, 104794. <https://doi.org/10.1016/j.chiabu.2020.104794>

^v Sohr-Preston, S.L., Scaramella, L.V. (2006). Implications of Timing of Maternal Depressive Symptoms for Early Cognitive and Language Development. *Clin Child Fam Psychol Rev* 9, 65–83 (2006). <https://doi.org/10.1007/s10567-006-0004-2>

^{vi} McCool S and Stevens IC (2011). Identifying speech, language and communication needs among children and young people in residential care. *International Journal of Language and Communication Disorders*; 46(6): 665-74

vii Bryan K., Garvani G., Gregory J. and Kilner K. (2015). Language difficulties and criminal justice: the need for earlier identification. *International Journal of Language and Communication Disorder*, 50(6), 763-775

viii RCSLT (2020). Speech and language therapists supporting pupils in alternative provision. Online: https://www.rcslt.org/wp-content/uploads/media/Project/RCSLT/RCSLT_ALT_Provision_2020.pdf

ix Gutman, L. M., Joshi, H., Khan, L. & Schoon, I. (2018). Children of the millennium: Understanding the course of conduct problems during childhood. Centre for Mental Health. <https://www.centreformentalhealth.org.uk/sites/default/files/2018-11/Children%20of%20the%20Millennium.pdf>

x Bryan, K. Garvani, G. Gregory, J. & Kilner, K. (2015). Language difficulties and criminal justice: the need for earlier identification. *International journal of language and communication disorders*, 50 (6), 763-775.

xi Wilson, J.J., Levin, F.R., Donovan, S.J. and Nunes E.V. (2006). Verbal Abilities as Predictors of Retention Among Adolescents in a Therapeutic Community. *Child Psychiatry and Human Development*, 36(4), 393-401.

Cohen, N. J., Farnia, F., and Im-Bolter, N. (2013). Higher order language competence and adolescent mental health. *Journal of Child Psychology and Psychiatry*, 54(7), 733–744.

Wintgens, A. (2012). Children with communication problems and additional emotional/ behavioural problems in: M. Kersner & J.A. Wright (Eds), *Speech and language therapy: the decision-making process when working with children* (2nd Ed.) New York: Routledge.