

Submission from the Royal College of Speech and Language Therapists Northern Ireland (RCSLT NI)

Response to the Department of Education Consultation: Attendance Matters

Executive Summary

RCSLT NI welcomes the Department of Education's *Attendance Matters* consultation and its recognition that attendance is shaped by wellbeing, inclusion and relational practice. The consultation appropriately acknowledges that "behaviour is often a function of communication."

However, Speech, Language and Communication Needs (SLCN) are not explicitly referenced elsewhere in the draft strategy, nor are communication-aware processes embedded within the proposed priorities and actions.

This represents a significant gap.

Around 10% of children and young people in the UK have a long-term speech, language and communication need that impacts on daily life (Norbury et al., 2017). In areas of social disadvantage, up to 50% of children may start school with delayed language (Johnson et al., 2010; Institute of Health Equity, 2020). The groups most affected by persistent absence in Northern Ireland — pupils entitled to Free School Meals, those on the SEN Register, those in EOTAS provision and children known to social services — are also groups with significantly elevated rates of SLCN.

The evidence demonstrates that SLCN are a vulnerability strongly associated with mental health difficulties, exclusion, youth justice involvement and long-term economic disadvantage. Embedding SLCN explicitly within the attendance strategy would strengthen early intervention, reduce inequalities and improve long-term outcomes.

Key points

- There is a clear correlation between pupils who are more likely to experience persistent and severe absence and the prevalence of speech, language and communication needs. This includes children living in areas of social disadvantage, pupils with SEND, those in alternative provision and those in contact with social care services.
- Speech and language therapists report increased anxiety and Emotionally Based School Non-Attendance (EBSNA) since the pandemic, particularly among autistic children and young people, those with social communication difficulties, and those with anxiety disorders such as selective mutism.

- Given the strong evidence that children and young people with poorer attendance records are also more likely to have SLCN, identification and support for SLCN should be considered as part of responses to persistent absence. This should include training for education staff and improved access to the specialist workforce.

1. SLCN in Northern Ireland

Approximately 20% of pupils in Northern Ireland are recorded on the SEN Register, with Speech, Language and Communication Needs among the most common areas of identified need (Department of Education Northern Ireland, 2025). Moreover, many children with other types of Special Educational Needs / Disability (SEND) will also have communication needs requiring additional support, including autistic children, those with learning difficulties, deafness, or social, emotional and mental health needs.

Research indicates that around 10% of children and young people experience long-term SLCN that impacts everyday functioning and educational participation (Norbury et al., 2017).

Evidence also demonstrates a strong relationship between socio-economic disadvantage and language development. Population studies show a clear social gradient, with children from the most disadvantaged groups approximately twice as likely to experience language delay as their more advantaged peers (Law et al., 2013).

Children entitled to Free School Meals and those living in more deprived neighbourhoods are more than twice as likely to have identified speech, language and communication needs. In some areas of social disadvantage, over 50% of children may start school with delayed or underdeveloped speech, language and communication skills (Johnson et al., 2010; Institute of Health Equity, 2020).

This relationship is particularly relevant in the context of school attendance. The groups most affected by persistent absence in Northern Ireland, including pupils entitled to Free School Meals, those on the SEN Register, pupils in Education Other Than at School (EOTAS) provision and children known to social services, are also groups with significantly elevated rates of SLCN.

Persistent absence is rarely attributable to a single cause. However, SLCN is disproportionately concentrated within the same populations experiencing attendance difficulties. Without explicit recognition of SLCN within the strategy, a foundational barrier to participation risks remaining unaddressed.

2. Educational, Mental Health and Social Impact of SLCN

Speech and language skills underpin learning, participation and wellbeing.

Early language development strongly predicts reading ability and later attainment (Snowling et al., 2011). Literacy difficulties are significantly more prevalent among children with SLCN (Dockrell and Howell, 2015). Only 9.8% of pupils with SLCN achieved pass grades in English and Maths GCSE compared with 42.4% of their peers (Department for Education, 2020).

There is also a strong longitudinal relationship between SLCN and mental health outcomes. Children with SLCN are approximately twice as likely to develop social, emotional and mental health difficulties (Yew and O’Kearney, 2013). Individuals with SLCN are six times more likely to experience clinical anxiety (Conti-Ramsden and Botting, 2008).

Communication needs are also highly prevalent among excluded and justice-involved populations. Up to 60% of young people in the youth justice estate have communication difficulties (Bryan et al., 2007).

Children and young people in alternative provision settings also show very high rates of speech, language and communication needs. In many cases, these needs were not identified before exclusion from mainstream education.

The most common reason for exclusion from mainstream education is disruptive behaviour. However, research shows that behavioural difficulties frequently co-occur with communication needs that are unrecognised or unsupported.

- Two thirds of pupils at risk of permanent exclusion from mainstream secondary school have language difficulties (Clegg et al., 2009).
- 81% of children with formally identified emotional and behavioural disorders have significantly below-average language abilities (Hollo et al., 2014).
- A study of pupils attending Sheffield Inclusion Centre found that 63% of pupils assessed between 2014 and 2018 had speech, language and communication needs.

These findings suggest that identification and support for SLCN should be considered within attendance and reintegration approaches for pupils in alternative provision.

The lifetime economic cost of unsupported language difficulties in UK children is estimated at £330 million (Pro Bono Economics, 2021).

The evidence demonstrates that SLCN is not a marginal issue; it is a cross-cutting determinant of educational engagement and long-term outcomes.

3. Impact of the Pandemic

Speech and language therapists report a significant increase in anxiety and EBSNA since the COVID-19 pandemic, particularly among autistic children and young people, those with social communication difficulties, and those with anxiety-related conditions such as selective mutism.

Members of the RCSLT report that the experience of remote and blended learning during school closures may have altered perceptions of school attendance for some children and young people. For pupils who experience communication difficulties, learning from home may have reduced exposure to challenging environments such as crowded classrooms, high levels of noise and complex social interactions. Returning to these environments may therefore present heightened anxiety.

Speech and language therapists have reported a marked increase in EBSNA among pupils with social communication needs since the pandemic.

The pandemic also disrupted key educational transitions. Pupils moving from primary to post-primary education during periods of lockdown often did so without the usual transition supports, contributing to increased anxiety about attendance, social relationships and school adjustment.

There is also increasing evidence that the pandemic negatively affected children's early speech, language and communication development. Reduced opportunities for social interaction limited opportunities for children to develop foundational communication skills, with the greatest impact observed among children from disadvantaged backgrounds.

- In a survey of 555 professionals working with babies and families, 92.4% reported that the pandemic had an ongoing negative impact on young children's speech, language and communication development (Hogg and Naves, 2022)
- National data from the Office for Health Improvement and Disparities (2022) shows that in 2021–22, 13.8% of children were below the expected level in communication skills at their two to two-and-a-half-year developmental review, compared with 11.1% in 2019–20 (Public Health Agency England, 2021).

Given the strong association between SLCN and school attendance difficulties, these children and young people must receive timely support to develop their communication skills to reduce the risk of persistent absence in the future.

4. Comments on the Summary of Priorities and Actions

RCSLT NI supports the structure of the proposed priorities. However, we recommend that SLCN be explicitly embedded across each priority to ensure that the strategy operationalises its recognition that behaviour is linked to communication.

Priority 1

Nurturing, Trauma-Informed Environments to Reduce EBSNA

The emphasis on nurturing and trauma-informed practice is welcome.

However, children with SLCN are twice as likely to develop mental health difficulties (Yew and O'Kearney, 2013), and individuals with SLCN are six times more likely to

experience clinical anxiety (Conti-Ramsden and Botting, 2008). Given the strong association between SLCN and EBSNA, SLCN should be explicitly referenced within EBSNA guidance and the Attendance Matters Strategy.

Professional learning and guidance for EBSNA should include structured consideration of SLCN, including Developmental Language Disorder (DLD) and social communication difficulties such as autism.

Priority 2

Inclusive Strategies for Positive Behaviour

Evidence demonstrates that behaviour frequently reflects unmet communication needs. Eighty-one per cent of children with emotional and behavioural disorders have significant language difficulties (Hollo et al., 2014), and two thirds of pupils at risk of exclusion have language difficulties (Clegg et al., 2009).

Behaviour policy reviews should explicitly reference communication adjustments, communication-friendly environments and identification of SLCN as part of inclusive behaviour practice.

Priority 3

Data-Driven Early Interventions

The commitment to accurate attendance data is strongly supported.

However, attendance data are not currently published by primary SEN category. Given that approximately 10% of children have long-term SLCN (Norbury et al., 2017), disaggregated data would enable targeted intervention.

Attendance data should therefore be reviewed and published by primary SEN category to identify disproportionate absence and monitor the impact of interventions.

Priority 4

Children Missing Education

Children missing education frequently overlap with populations experiencing high prevalence of SLCN, including those in alternative provision and those known to social services.

Cross-departmental responses should incorporate SLCN assessment and referral pathways within reintegration processes.

Priority 5

Whole Community Approach to Attendance

Community-based initiatives, including the RAISE Programme, present an opportunity to address early communication vulnerability, particularly in disadvantaged areas where up to 50% of children may start school with delayed language (Johnson et al., 2010).

Community attendance initiatives should therefore include parental awareness and early language support components.

Priority 6

Transforming School Support

The transformation of the Education Welfare Service towards prevention and early intervention is welcomed.

Attendance difficulties frequently intersect with unmet communication needs. Without speech and language expertise accessible within attendance pathways, early intervention may be incomplete.

Transformation plans should include mechanisms to ensure timely access to speech and language therapy advice within attendance cases, particularly where EBSNA or behavioural distress is present.

5. Recommended Strategic Amendments

As highlighted above, children and young people who are more likely to experience persistent and severe absence are also more likely to have SLCN. Given this evidence, measures to improve attendance must include support for education staff to equip them with the knowledge and skills to:

- develop children's language and communication skills
- identify children and young people who struggle with their speech, language and communication
- understand what they can do to support them.

This could be delivered through:

- training for early career teachers and continuous professional development for existing teaching staff
- enhanced training for support staff to assist teachers in the provision of universal and targeted support for language and communication development in schools.

The Royal College of Speech and Language Therapists has developed an e-learning course — *Mind Your Words* — designed for professionals working with children and young people. The tool aims to improve understanding of children and young people who have both mental health needs and SLCN.

In addition, it is vital that pupils who are more likely to experience persistent and severe absence can access support from specialist professionals, such as speech and language therapists.

Currently, several issues are affecting the specialist workforce, including:

- insufficient numbers of specialists being trained to meet demand
- an exodus of professionals from the public sector
- increasing demand and complexity of need
- pandemic-related pressures increasing waiting times.

Attendance policy should explicitly recognise SLCN as a significant risk factor associated with persistent absence and Emotionally Based School Non-Attendance.

Where attendance concerns first emerge, there should be routine consideration of whether SLCN may be contributing to the child's difficulties.

Attendance data should also be published by primary SEN category, including SLCN, to support targeted responses.

Finally, strengthening professional learning for school leaders and teachers on identifying and supporting pupils with SLCN is essential.

6. Conclusion

Persistent absence in Northern Ireland disproportionately affects disadvantaged pupils and those with SEN. SLCN are highly prevalent within these same groups and are associated with poorer attainment, increased anxiety, higher exclusion risk and long-term disadvantage.

The *Attendance Matters* strategy recognises that behaviour is a function of communication. Embedding SLCN explicitly within the strategy would operationalise this principle and significantly strengthen Northern Ireland's approach to attendance reform.

7. About the RCSLT

The Royal College of Speech and Language Therapists (RCSLT) is the professional body for speech and language therapists, students and support workers, with more than 20,000 members across the UK.

Speech and language therapists are an integral part of the children's workforce, working alongside parents and professionals across education, health and social care to support children with speech, language and communication needs and those with eating, drinking and swallowing difficulties.

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