SANDRA DUNAGAN DEAL
CENTER FOR EARLY LANGUAGE AND LITERACY
AT GEORGIA COLLEGE & STATE UNIVERSITY

LANGUAGE
AS A MISSING LINK

LANGUAGE AS A MISSING LINK
Part 1: Why?

Purpose of this Toolkit

This toolkit is designed for individuals, practitioners, and policymakers to employ practices that apply language as a well-being indicator to improve educational, mental health, and well-being outcomes - and impact quality of life - from birth through adulthood.

Part 1: Why?

Part 2: What?

Part 3: How?

Language development dramatically and positively impacts life outcomes. Conversely, the failure to develop a capacity for effective communication jeopardizes emotional well-being and educational attainment. We must institute a new, proactive approach in which all who interact with caregivers and children employ the understanding that language is the primary vehicle for frequent and positive social connections. This approach will consider language as a well-being indicator that is foundational for literacy and academic success, emotional and mental health, and positive quality of life.

The toolkit guides us to follow these steps to proactively employ language as a well-being indicator. Practical strategies are provided to enable us to NOTICE language indicators of well-being, MONITOR engagement as a means to proactively gauge language development, SCREEN for potential difficulties with language development if indicated, and use the information gained from screening to ENHANCE opportunities for engagement at home, in the classroom, and in community settings. When children are engaged, their use of language is frequent, functional, socially oriented, and fluid across settings.

This toolkit provides tools to implement the "why" and "what" in a manner that is sustainable for individuals, practitioners, and policymakers. This section is designed to help apply the understanding that language is the primary vehicle for frequent and positive social connections. It begins with how we as peers can mentor one another—parent to parent, health care provider to health care provider, educator to educator—to identify what we're already doing to enhance language and to identify opportunities. Several ideas are offered to address the gap between our knowledge of the impact of language and our universal practices and policies in order to apply this vision.

Part 1: WHY?

> "If all my possessions were taken from me with one exception, I would choose to keep the power of communication, for by it I would soon regain all the rest."
>
> **- Daniel Webster**

Language is the primary vehicle by which one communicates needs, formulates ideas, develops and maintains relationships, and understands the world around us. [1]

Language includes: [2]
- Expressive language: expressing one's thoughts and feelings using gestures, facial expressions, vocalizations, words⁕ and writing,
- Receptive language: understanding the intents of others,
- Pragmatic language: the way verbal and nonverbal communication is used in social situations; it is also used to regulate emotions.

Language is foundational for literacy and educational success, emotional and mental health, and positive quality of life.

Language has a demonstrated protective effect on mental and physical health and well-being. [6]

Language provides the "inner dialogue" essential to effectively reason, comprehend, regulate emotions, and cope with the demands of everyday life. [7, 8]

⁕Words include speech, pictures, sign language, text, or technology.

Part 1: WHY?

WHY is language a missing link to social, emotional, cognitive, and academic development? [10]

- Development and use of language—from infancy through adulthood — can dramatically impact an individual's quality of life and life outcomes.

- The failure to develop a capacity for effective communication jeopardizes social connectedness, educational outcomes, and emotional and mental health.

- Difficulties with language development are associated with an increased risk of persistent emotional and mental health problems, school dropout, involvement with the juvenile justice system, and unemployment.

- Language development has a significant role in these outcomes, yet it is often not considered when developing solutions.

- Without noticing language as a missing link, we're losing opportunities to improve the quality of life for children of all ages.

WHY is language an opportunity?

- If we consider language as a well-being indicator similar to others such as vision, hearing, and oral health, we can lessen the likelihood of misdiagnoses and prevent adverse outcomes.

- If we apply the understanding that engagement is a proactive gauge of language development, we can boost social communication, emotional regulation, and executive functioning.

- Language provides the capacity to obtain and understand basic health information essential to make appropriate health decisions that can impact lifelong physical and mental health outcomes. [10]

It's time for individuals, practitioners, and policymakers to institute a new, proactive approach that employs language as a well-being indicator.

SPEECH VS. LANGUAGE

Speech is how we physically produce sounds - articulation, voice, and fluency.

Language is about meaning and connection with others - expressing thoughts and emotions, understanding others' intentions, and deciphering social cues.

WHY IS LANGUAGE A MISSING LINK?

INFANTS & TODDLERS
(BIRTH - 3 YEARS)

EARLY CHILDHOOD
(3 - 5 YEARS)

ELEMENTARY & SECONDARY SCHOOL-AGED CHILDREN
(5 - 18 YEARS)

CHILD WELFARE

JUVENILE JUSTICE

THE MISSING LINKS

Frequent social interactions between babies and their caregivers are the "fuel" for developing language.

Language development through social connections in infants and toddlers has a direct impact on their emotional resilience.

Language development in early childhood significantly predicts third-grade literacy and math outcomes.

Young children with well-developed language demonstrate greater emotional regulation and academic skills and fewer emotional or behavioral problems at kindergarten entry.

School-aged children with well-developed language also develop a strong "inner dialogue" that is needed to bolster social, emotional, cognitive, and academic development.

Difficulties with language development are frequently misinterpreted as cognitive, emotional, academic, or behavioral problems.

Difficulties with language development are often the missing link in children in foster care, when they appear to be out of touch with their feelings, use challenging behavior, and disengage with their caregivers, educators, and health care providers.

Children who have experienced abuse and neglect are at least three to six times more likely to have difficulties with language development than their peers, particularly in the areas of expression and social use of language. This often limits their use of language to communicating only basic needs rather than for social or emotional reasons.

Children and teens involved with juvenile justice are five times more likely to have difficulties with language development expected for their age than their peers who are not involved with juvenile justice.[9, 21]

Language is almost never considered when a child or teen doesn't understand the proceedings and processes of the juvenile justice system, and when there is difficulty effectively expressing remorse. The expression of remorse is complex and requires effective use of language. Not only must the words be carefully selected—but the delivery, tone of voice, and facial expression are equally important.

Infants & Toddlers (Birth - 3 Years)

The Missing Link

Frequent social interactions between babies and their caregivers are the "fuel" for developing language.

Language development through social connections in infants and toddlers has a direct impact on their emotional resilience.

The Opportunity

By mentoring caregivers to engage in language-rich social interactions, we create an opportunity for infants and toddlers to feel socially connected, understand routines, and express themselves through body language, gestures, play, and words.

When infants fall in love with the social world, the social brain becomes wired to learn language, which sets the stage for later social and academic success.

▶ **WATCH VIDEO**

In this video, notice what the caregiver is doing to enhance engagement with his toddler —such as looking at the toddler when speaking, responding to the toddler's gestures, and participating in back and forth conversation with the toddler.

Video Credit: ABC News

The Research

By age 2, most children use single words and brief phrases to communicate for many reasons, including requesting actions ("daddy up") and requesting comfort ("mommy hug"). By kindergarten, they will demonstrate greater emotional regulation and academic skills and fewer challenging behaviors. [3, 4]

Action Items

- Consider language as a well-being indicator similar to others such as vision, hearing, and oral health.
- Provide language nutrition coaching with expecting and new parents to strengthen caregiver efficacy to engage in frequent, positive, language-rich social interactions with their babies.
- Provide support for families of infants within birthing hospitals, including those admitted to a neonatal intensive care unit (NICU), to experience socially engaging interactions with their babies.
- Implement a comprehensive approach in preventative care settings to universally notice, monitor, screen, and enhance engagement within typical interactions between families and their infants. (Refer to the "What" section of the toolkit to learn more.)

Early Childhood (3 - 5 Years)

The Missing Link

Language development in early childhood significantly predicts third-grade literacy and math outcomes.

Young children with well-developed language demonstrate greater emotional regulation and academic skills and fewer emotional or behavioral problems when they enter kindergarten.

The Opportunity

Provide training for early childhood educators to enhance opportunities for engagement to help all children feel socially connected, understand social routines, and communicate to others what they have learned. When children are engaged, their use of language is frequent, functional, socially oriented, and fluid across settings.

In this video, learn about investment as an element of engagement. Investment is the "why" of social interaction. We are more invested with those we interact with who stimulate our interest and provide support for us to stay connected (1:58-2:26).

▶ **WATCH VIDEO**

The Research

Results from a national study of more than 265,000 five-year-olds found that children with effective use of language and communication were 19 times more likely to have high mental health competence than children without effective use of language and communication. [20]

Children who have difficulties with language development at age 5 are four times more likely to have reading difficulties, three times more likely to have mental health difficulties, and two times more likely to be unemployed as an adult.

Action Items

- Consider language as a well-being indicator similar to others such as vision, hearing, and oral health.
- Expand use of strategies in routine well-child visits that provide families with guidance about noticing and how to enhance language development.
- Implement a comprehensive approach in early childhood settings to notice, monitor, screen, and enhance engagement within universal early childhood practice. (Refer to the "What" section of the toolkit to learn more.)

Elementary & School-Ages (5-18 Years)

The Missing Link

School-aged children with well-developed language also develop a strong "inner dialogue" needed to bolster social, emotional, cognitive, behavioral, and academic development. [7, 8]
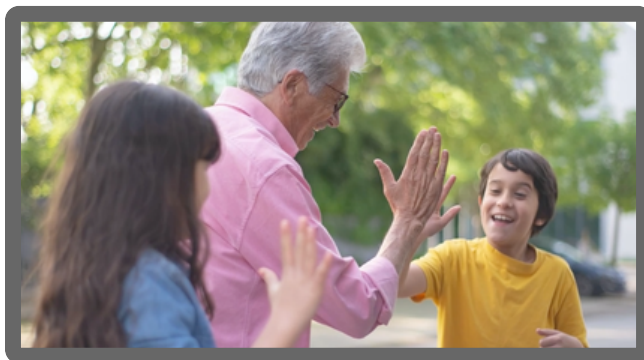
Difficulties with language development are frequently misinterpreted as cognitive, emotional, academic, or behavioral problems. [5]

The Opportunity

We can support language development by universally strengthening engagement in the environment using multimodal instruction to stimulate interest and motivation with hands-on materials, support an understanding of social routines through peer role models and visuals, and provide options and opportunities to convey one's thoughts and feelings.

When language is enhanced, the risk for behavior challenges and mental health concerns can be mitigated. Language is vital to the development of an inner dialogue, which is required to effectively reason, regulate emotions, and cope with problems. This has a demonstrated protective effect on children's mental health.

In this video, notice how the teacher provides visuals and related materials for each child and how this appears to give an option that enhances initiation, a key element of engagement (4:00-4:27).

▶ WATCH VIDEO

The Research

Language development is one of the most important foundations for social and emotional development and educational progress. By the end of elementary school, only 15% of students with language difficulties achieve the expected reading level, compared to 61% of their peers. [3, 19]

Action Items

- Consider language as a well-being indicator similar to others such as vision, hearing, and oral health.
- Train educators to notice language indicators of well-being and the engagement levels of their learners, such as social connectedness, following social routines, and the ability to express to others what they've learned.
- Support educators to enhance engagement through multiple modes of instruction—embedding language within natural routines that provide visuals, hands-on materials, and shared experiences—so that all students can share ideas, understand classroom discourse, transition from one activity to another, understand instructions, and successfully communicate with peers and adults.
- Implement a comprehensive approach in school settings to notice, monitor, screen, and enhance engagement within classroom lessons. (Refer to the "What" section of the toolkit to learn more.)

Child Welfare

The Missing Link

Difficulties with language development are often the missing link in children in foster care, when they appear to be out of touch with their feelings, use challenging behavior, and disengage with their caregivers, educators, and health care providers. [15]

Children in foster care are more likely to have difficulties with the social use of language. This often limits their use of language to communicating only basic needs rather than for social or emotional reasons. [12]

The Opportunity

When caregivers, educators, health providers, and court staff enhance their practices and environments to foster children's engagement at home, in school, and other routine settings, more positive social, academic, and mental health outcomes can be achieved.

In this video, notice how the parents are enhancing social use of language through engaging both children while sharing a meal. They are helping the young children in the family build language through back and forth conversation with open-ended questions.

▶ WATCH VIDEO

The Research

Children who have experienced abuse and neglect are at least three to six times more likely to have difficulties with language development than their peers, particularly in the areas of expression and the social use of language. Research revealed that 44% of 42-month-old neglected children had pragmatic language (social communication) difficulties, compared to 4% of non-neglected same-age peers. [14, 18] Children in foster care who do not indicate language development typically expected for their age experience longer stays in foster care than those without language difficulties. [14, 18]

Action Items

- Consider language as a well-being indicator similar to others such as vision, hearing, and oral health. [1] [2]
- Review and update existing policies, procedures, trainings, and practices to proactively employ language as a well-being indicator through developmentally responsive intake, assessment, care planning, and discharge protocols.
- Provide education to increase awareness and understanding of the relationship between language development and mental health development so that appropriate guidance is provided to meet children's needs.
- Implement a comprehensive approach that enables family members, care providers, case managers, and others to notice, monitor, screen, and enhance engagement in every-day activities at home, at school, and in the community. (Refer to the "What" section of the toolkit to learn more.)

Juvenile Justice

The Missing Link

Children and teens involved with juvenile justice are five times more likely to have difficulties with language development expected for their age than their peers who are not involved with juvenile justice.[9, 21] This is also likely relevant into adulthood populations.

Language development is almost never considered when an individual doesn't engage in court proceedings and processes, and when they cannot effectively express remorse. In the justice system, expressions of remorse perceived as adequate are often rewarded, while inadequate expressions of remorse may result in harsher penalties.

However, expressing remorse requires substantial expressive, receptive, and pragmatic language. Not only must the words be correct, but the delivery, tone of voice, and facial expression enhance effectiveness.[10-12]

The Opportunity

If we educate juvenile court and juvenile justice staff to notice a child's language development upon intake, we have the opportunity to enhance our practices and environments in accordance with a child's ability to understand judicial proceedings and processes, express remorse, and effectively communicate thoughts and feelings.

This opportunity can also be extended beyond intake by mentoring those interacting with children in juvenile justice facilities to strengthen the environment by promoting language use and understanding through multimodal strategies, such as visual supports for understanding, hands-on materials, and role play or rehearsal. For example, remorse is developed within reflective discourse and with the role models of caregivers.

The Research

Nearly two-thirds of children involved with juvenile justice have significant levels of difficulty with language development that compromise their participation during intake proceedings and their ability to engage in and benefit from rehabilitative strategies. However, language and communication are almost never considered at any point in the process.[11]

Action Items

- Consider language as a well-being indicator similar to others such as vision, hearing, and oral health.
- Review and update existing policies, procedures, trainings, and practices to proactively employ language as a well-being indicator through developmentally responsive intake, assessment, care planning, and discharge protocols.
- Implement a comprehensive approach to notice, monitor, screen, and enhance engagement within universal settings in the juvenile justice system and in preparation for court appearances. (Refer to the "What" toolkit to learn more.)

"When children don't have language, their behavior becomes their language."

- Judge Peggy H. Walker, Ret., Douglas County Juvenile Court

REFERENCES & ACKNOWLEDGEMENTS

1. Law J, Charlton J, Asmussen K. Language as a Child Wellbeing.
Indicator. Early Intervention Foundation in collaboration with Newcastle University; 2017. Available at:
eif.org.uk/report/language-as-a-child-wellbeing-indicator

2. Owens R. Language Development: An Introduction. 10th ed. Hoboken, NJ: Pearson; 2019.

3. Language development and literacy: Synthesis. In: Tremblay RE, Boivin M, Peters RDeV, eds. Rvachew S, topic ed. Encyclopedia on Early Childhood Development [online]. Available at: http://www.child-encyclopedia.com/language- development-and-literacy/synthesis. Updated October 2018.

4. Morgan PL, Farkas G, Hillemeier MM, Hammer CS, Maczuga S. 24-Month- Old Children With Larger Oral Vocabularies Display Greater Academic and Behavioral Functioning at Kindergarten Entry. Child Dev. 2015;86(5):1351-1370.

5. Chow JC, Wehby JH. Profiles of Problem Behavior in Children With Varying Language Ability. Journal of Emotional and Behavioral Disorders. 2019;27(2):110- 118.

6. Westrupp EM, Reilly S, McKean C, Law J, Mensah F, Nicholson JM. Vocabulary Development and Trajectories of Behavioral and Emotional Difficulties Via Academic Ability and Peer Problems. Child Dev. 2019;91(2):1-18.

7. Starr LR, Hershenberg R, Shaw ZA, Li YI, Santee AC. The perils of murky emotions: Emotion differentiation moderates the prospective relationship between naturalistic stress exposure and adolescent depression. Emotion. 2020;20(6):927-238.

8. Lindquist KA, MacCormack JK, Shablack H. The role of language in emotion: predictions from psychological constructionism. Front Psychol. 2015;6(444):1-17.

9. Snow PC. Restorative Justice Conferencing, Oral Language Competence, and Young Offenders: Are These High-Risk Conversations? Prevention Researcher. 2013;20(1):18-20.

10. Weldon AB, Stimpert KK, Belton W, Galloway-Benefield C, Rubin E, McGiboney GW. Language: An opportunity to strengthen health and development in children and adolescents: a commentary. J Sch Health. 2021; DOI: 10.1111/ josh.12988

11. Hughes N, Chitsabesan P, Bryan K, et al. Language impairment and comorbid vulnerabilities among young people in custody. Journal of Child Psychology and Psychiatry. 2017;58(10):1106–1113.

12. LaVigne M, Van Rybroek G. Breakdown in the Language Zone: The Prevalence of Language Impairments among Juvenile and Adult Offenders and Why it Matters. US Davis Journal of Juvenile Law and Policy. 2010;1127:37-123.

13. Winstanley M, Webb RT, Conti-Ramsden G. Psycholinguistic and socioemotional characteristics of young offenders: Do language abilities and gender matter? Legal Criminol Psychol. 2019;24(2):1-20.

14. Krier JC, Green TD, Kruger A. Youths in foster care with language delays: Prevalence, causes, and interventions. Psychology in the Schools. 2018;55:523- 538.

15. van der Kolk, BA. Developmental Trauma Disorder: Toward a rational diagnosis for children with complex trauma histories. Psychiatric Annals. 2005;35(5):401- 408.

16. Townsend J, Rubin E. Social Emotional Engagement Knowledge and Skills (SEE- KS) for 2018 UDL-IRN Summit Proceedings.

17. Rubin E, Townsend J, Vittori L. Social Emotional Engagement – Knowledge & Skills: Social Engagement Ladder (Whole Group).

18. Di Sante M, Sylvestre, A, Bouchard, C, Leblond, J. Parental behaviors associated with the level of pragmatic language ability of 42-month-old neglected children. Child Abuse & Neglect. 2020;104:104482.

19. Bercow J. Bercow: Ten Years On. An Independent Review of Provision for Children and Young People with Speech, Language and Communication Needs in England. 2018. Available at: http://www.bercow10yearson.com/wp-content/ uploads/2018/03/337644-ICAN-Bercow-Report-WEB.pdf.

20. Goldfeld S, Kvalsvig A, Incledon E, O'Connor M. Epidemiology of positive mental health in a national census of children at school entry. J Epidemiol Community Health. 2017;71(3):225-231. doi:10.1136/jech-2015-207061

21. Hopkins T, Clegg J, Stackhouse J. Examining the association between language, expository discourse and offending behaviour: an investigation
of direction, strength and independence. Int J Lang Commun Disord. 2018;53(1):113-129. doi:10.1111/1460-6984.12330

LANGUAGE AS A MISSING LINK
Part 2: What?

Purpose of this Toolkit

This toolkit is designed for individuals, practitioners, and policymakers to employ practices that apply language as a well-being indicator to improve educational, mental health, and well-being outcomes - and impact quality of life - from birth through adulthood.

Part 1: Why?

Part 2: What?

Part 3: How?

Language development dramatically and positively impacts life outcomes. Conversely, the failure to develop a capacity for effective communication jeopardizes emotional well-being and educational attainment. We must institute a new, proactive approach in which all who interact with caregivers and children employ the understanding that language is the primary vehicle for frequent and positive social connections. This approach will consider language as a well-being indicator that is foundational for literacy and academic success, emotional and mental health, and positive quality of life.

The toolkit guides us to follow these steps to proactively employ language as a well-being indicator. Practical strategies are provided to enable us to NOTICE language indicators of well-being, MONITOR engagement as a means to proactively gauge language development, SCREEN for potential difficulties with language development if indicated, and use the information gained from screening to ENHANCE opportunities for engagement at home, in the classroom, and in community settings. When children are engaged, their use of language is frequent, functional, socially oriented, and fluid across settings.

This toolkit provides tools to implement the "why" and "what" in a manner that is sustainable for individuals, practitioners, and policymakers. This section is designed to help apply the understanding that language is the primary vehicle for frequent and positive social connections. It begins with how we as peers can mentor one another—parent to parent, health care provider to health care provider, educator to educator—to identify what we're already doing to enhance language and to identify opportunities. Several ideas are offered to address the gap between our knowledge of the impact of language and our universal practices and policies in order to apply this vision.

Part 2:
WHAT?

"When a flower doesn't bloom, you fix the environment in which it grows, not the flower."

- Alexander Den Heijer

WHAT are our next steps and opportunities?

In an attempt to employ language as a well-being indicator, opportunities exist for individuals, practitioners, and policymakers to integrate the following practices into everyday settings:

NOTICE

When we view language as a well-being indicator similar to others such as vision, hearing, and oral health, those who interact with children will NOTICE the language indicators of well-being that enable a child to communicate for different reasons (i.e., why a child is communicating), communicate in different ways (i.e., how a child is communicating), regulate emotions with the help of others, and regulate emotions on one's own. It is these aspects of language that determine well-being and set the stage for literacy, academic and emotional resilience.

MONITOR

A simple tool can be used to MONITOR whether an individual or group of children is actively engaged, socially connected, following social norms and routines, and expressing thoughts and feelings to others. This tool helps those who interact with children discern where the missing link hasn't yet been discovered. By monitoring engagement as a gauge of language development, we can observe children who may need an initial screening, since universally screening language development isn't always feasible, cost effective, or necessary.

SCREEN

A brief, standardized screening tool can then be administered to SCREEN children observed during monitoring (a sample of available tools is provided in this section). Screening results should be used to inform how interactive social routines can be enhanced to benefit all children.

ENHANCE

Implement a comprehensive approach to ENHANCE language by supporting the knowledge of all those who interact with children to identify opportunities to fuel engagement. This begins by modifying the environment to enhance elements of engagement such as a child's social connectedness (investment), understanding (independence), and opportunities to share what they know (initiation).

NOTICE

NOTICE language indicators of well-being by increasing awareness that:

- If we view language as a well-being indicator similar to others like vision, hearing, and oral health, caregivers, educators, and health care providers will become aware of language indicators of well-being proactively so we can be developmentally responsive when we NOTICE opportunities;
- There are specific aspects of language that are essential to well-being across the developmental continuum (from infancy through adulthood). These include:
  - communicating for different reasons (e.g., sharing attention, sharing emotion, requesting actions, share and requesting information),
  - communicating in different ways (e.g., gestures, facial expressions, tone of voice as well as a wide range of vocabulary and sentences expressed in multimodal ways – spoken language, written language, or assistive technology, etc.),
  - regulating emotions with the help of others (e.g., requesting assistance, requesting comfort, and regulating activities to soothe when distressed), and
  - regulating emotions on one's own (e.g., using nonverbal and verbal strategies to self-soothe, anticipate transitions, and problem solve).
- If language development is already part of your work with families, educators, and other caregivers, please review this document to ensure these specific language indicators of well-being are being noticed and supported; and
- By recognizing language as a well-being indicator, the foundation will be laid to encourage those who interact with children to provide opportunities for frequent, language-rich, social interactions vital for social and emotional development, emotional regulation, and executive functioning.

This freely accessible tool can be shared with individuals, practitioners, and policymakers to generate awareness of language indicators of well-being from infancy through adulthood. These indicators relate to a child's capacity to communicate for different reasons (i.e., why a child is communicating), to communicate in different ways (i.e., how a child is communicating), to regulate emotions with the help of others, and to regulate emotions on one's own. It is these aspects of language that determine well-being and set the stage for literacy, academic and emotional resilience.

Find the column that best matches your learner so that you can be developmentally responsive.

NOTICE Language Indicators of Well-Being

	BEFORE WORDS			EMERGING LANGUAGE	
	Children are building their attachment to the social world and communicating primarily through body language, gestures, and facial expressions.			Children are beginning to use single words, brief phrases, and simple sentences with either speech, pictures, sign language, or technology.	
The Why	Responding to a familiar caregiver's voice, gestures, touch, and facial expressions	Communicating for different purposes including: sharing attention, requesting, and sharing emotion	Communicating for many reasons including starting social games, sharing, protesting, and requesting actions	Communicating frequently within back and forth exchanges with others	Communicating to request assistance, share emotion, and request information (e.g., where's__?)
The How	Vocalizing or babbling in a back and forth manner	Using gestures, facial expressions, imitated actions, or vocalizations to gain attention	Pairing gestures with sounds, routinized or imitated words (either speech, pictures, signs, or other)	Using of single words for object labels, people's names, action words, modifiers, and relational words (e.g., up, down, in)	Using and understanding of combinations of words with people's names and verbs
Coping With Others	Showing interest and soothing in response to a familiar caregiver	Soothing in response to others' facial expressions, actions, and emotion/energy states	Seeking comfort and engagement from familiar caregivers	Seeking comfort from others by asking for attention and comfort items	Requesting soothing activities when distressed
Coping On One's Own	Using familiar routines and materials as a source of comfort	Using objects familiar to natural routines to soothe during transitions	Imitating simple play actions to rehearse real-life activities	Using play actions with objects to rehearse real-life activities.	Using simple self-regulatory language or symbols ("first...then") to maintain engagement in activities.

"Symbols" refers to spoken words, written words, picture symbols, sign language, etc.

This table was developed by Rubin, Weldon, McGiboney, Thomas & Pileggi (2023); Reference: Prizant, Wetherby, Rubin, Laurent & Rydell (2006); Updated September 2023

SANDRA DUNAGAN DEAL CENTER FOR EARLY LANGUAGE AND LITERACY

NOTICE Language Indicators of Well-Being

	DEVELOPING LANGUAGE COMPETENCE			CONVERSATIONAL
	Children are using simple and complex sentences, while still developing their use and understanding of language in unfamiliar situations, for a range of communicative functions (expressing emotion, asking for help, sharing remorse), and for the use of inner self-talk to guide their behavior.			Children are consistently using complex sentences, conversational level discourse, and "inner dialogue" for executive functioning. They are likely developing their use of language in a range of social contexts.
The Why	Communicating to share emotion and describe the emotions of others	Communicating to share simple stories and past events	Initiating and maintaining conversation by both commenting and requesting information	Communicating for many purposes including negotiating, collaborating, and expressing remorse or empathy with others
The How	Using simple sentences, including those with people's names, verbs and nouns (either speech, pictures or symbols)	Using a range of sentences, including complex (either speech, pictures or symbols)	Providing essential background information based upon listener's perspective	Understanding and using complex sentences as well as a range of gestures, facial expressions, and tone of voice as a means to interpret figurative language (e.g., metaphors), humor and sarcasm
Coping With Others	Requesting soothing items when distressed	Repairing breakdowns in communication and sharing causes of emotion	Requesting a break, assistance, and regulating activities to soothe when distressed	Responding to assistance offered by others to either engage or soothe in new and challenging activities
Coping On One's Own	Using self-regulatory language or symbols to anticipate transitions between activities	Using self-regulatory language or symbols to anticipate the steps of extended activities	Using self-regulatory language by telling stories and enacting social sequences to prepare for future events	Using language or symbols to problem-solve and self-monitor in current or future events (i.e., executive functioning)

"Symbols" refers to spoken words, written words, picture symbols, sign language, etc.

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SANDRA DUNAGAN DEAL CENTER FOR EARLY LANGUAGE AND LITERACY

MONITOR

MONITOR whether an individual or group of children are socially connected, following social routines, and expressing their thoughts and feelings to others with the free and easy to use Social Engagement Ladder. Discover potential missed opportunities to boost language development.

3 I'S: ELEMENTS OF ACTIVE ENGAGEMENT

Get a gauge of engagement in everyday settings that involve social interaction to monitor language development.

INVESTMENT

Are children motivated to engage and stay connected?

Investment is the "why" of language use and relates to our social connectedness. We use language when we have something to say; we learn more language when we have many opportunities and reasons to communicate with others; and we engage with our caregivers, educators, and peers when we feel connected.

INDEPENDENCE

Do children know what to do and what is being taught?

"Knowing what to do"—following social routines, listening to others, anticipating others' actions, problem-solving on one's own—is a result of language comprehension and supports independence. We engage in everyday activities and follow social routines when we understand conventional forms of non-verbal language like gestures and facial expressions and have access to previously modeled language and tools that remind us of the meaning of language such as multimedia, graphics, role play, and hands-on materials. This helps develop our inner dialogue to regulate emotions and problem solve in social situations—also known as executive functioning.

INITIATION

Are children sharing what they know?

We initiate when we communicate with others in different ways—both verbally and nonverbally—when we have opportunities and options, and when we interact with those who respond to our many forms of communication, including facial expressions, gestures, words, and writing.

For more information on these tools, please visit: www.SEE-KS.com

THE SOCIAL ENGAGEMENT LADDER

When children display all "3 I's" of engagement, communication is frequent, functional, socially oriented, and fluid across settings. This typically indicates a level of engagement which fuels language use and development.

When the ladder highlights opportunities to enhance engagement, this may be a result of a mismatch between the child's current language indicators of well-being and the supports available to that child both interpersonally and in the environment.

The Social Engagement Ladder monitors whether children are actively engaged in everyday activities that involve social interaction. This tool measures investment, independence, and initiation when engaging in everyday activities.

LEARN HOW TO USE THE SOCIAL ENGAGEMENT LADDER AS A TOOL TO MEASURE ENGAGEMENT:

- Finding the Fuel for Learning—Infant-Toddler Settings
- Finding the Fuel for Learning—Early Childhood Settings
- Finding the Fuel for Learning—Elementary Settings
- Finding the Fuel for Learning—Teenagers & Secondary School-Aged Settings

For more information on these tools, please visit: www.SEE-KS.com

GROUP VERSION

The use of the whole group Social Engagement Ladder is relevant when monitoring whether a group of children are actively engaged within large group settings such as classrooms, social and therapeutic environments, and court proceedings.

INDIVIDUAL VERSION

An individual version of the Social Engagement Ladder is used to provide additional information about children, illustrating levels of engagement of that individual in daily interactive routines.

MONITOR

Children who are at **0** (not focused) or **1** (emerging/fleeting) may be those whose engagement is either not evident or inconsistent, while a **2** (partially engaged) represents a child who is responsive and present. Children who are at **3** (mostly engaged) or **4** (fully engaged) are displaying positive emotion, participating in social routines, and communicating their thoughts and feelings in an effective and back and forth manner.

For children who score a **0**, **1** or **2**, there are opportunities to **ENHANCE** engagement.

If a child is at a **0**, **1**, or a **2** in the whole group version, it would also then be recommended that an individual Social Engagement Ladder be used to determine if those engagement levels are consistent across settings. If a child is at **0**, **1**, or **2** in several activities, this highlights a potential need to **SCREEN**. A brief language screening to discern whether language development might be a missing link contributing to their disengagement may support our efforts to **ENHANCE** engagement.

Photo source: Tronick, E. Still Face Experiment, UMass Boston

0: No Focus	**1: Emerging/ Fleeting**	**2: Partially Engaged**	**3: Mostly Engaged**	**4: Fully Engaged**
Child is not engaged, looking away	Child engagement is not evident or consistent	Child is responsive and present	Displaying positive emotion, participating in routines	Communicating thoughts and feelings in an effective and sustained manner
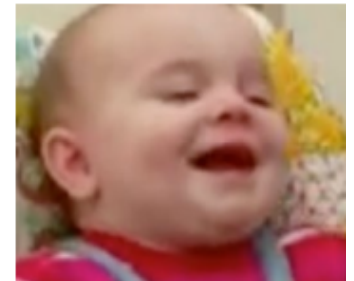
SCREEN

We can administer a brief screening tool with children who consistently score **0**, **1**, or **2** on the **Social Engagement Ladder** during typical interactive daily activities. Using a standardized screening tool can help discern the presence of difficulties with language development, and these results inform how daily routines in the environment can be enhanced with strategies that benefit all children.

- These screening tools can be administered in brief periods of time (10 – 20 minutes) and compare the child to the performance of same-aged peers. Please note that the data yielded are based upon neurotypical ranges and may not accurately represent an individual or neurodivergent learner.

- A screening tool identifies opportunities to enhance the learning setting for children who may have opportunities to develop language indicators of well-being, and determine the need for additional language assessment for children with significant language difficulties.

- Screening is too often used only to identify significant difficulties. However, even simple differences in language expression, understanding, and use are worthy of attention. Observing these differences can be used by adults to enhance the environment.

- A screening tool can be used to discern differences in levels of language development from same-aged peers that are notable, but not significant—a finding that yields immediate implications for those who interact with the child.

- Screening tools that consider expressive, receptive, and pragmatic language that are relevant for infancy through adolescence include:
    - **Communication and Symbolic Behavior Scales Developmental Profile™ Infant-Toddler Checklist** (6 months to 2 years)
    - **Preschool Language Scales—5-Screener** (Birth to 8 years)
    - **Childhood Communication Checklist—2** (CCC-2) (4 to 17 years)
    - **Clinical Evaluation of Language Fundamentals—Preschool—3-Screener** (3 to 7 years)
    - **Clinical Evaluation of Language Fundamentals—5-Screener** (5 to 21 years)

- While results may warrant a deeper and more comprehensive assessment conducted by a licensed speech language pathologist, this initial screening can be conducted by those who interact with the child in health, education, social, and therapeutic settings, such as nurses, social workers, and counselors.

- The next step is to **ENHANCE** active engagement by addressing language understanding, expression, and use within everyday activities and creating an environment that's supportive at a more universal level.

ENHANCE

We can enhance active engagement by supporting the knowledge, skills, and self-efficacy of individuals and practitioners who interact with children, such as families and other caregivers, educators, and health care providers, to enhance the environment when there are opportunities to strengthen one of the "3 I's" of engagement.

INVESTMENT

When a child is withdrawn, distracted, depressed, or showing a lack of sustained attention, there may be opportunities to strengthen their language indicators of well-being (both in terms of why they are communicating and how they are regulating emotions). We can modify our communication style by adjusting our response to the child, providing opportunities for the child to connect, and modifying the environment by embedding more hands-on, movement-based, and relevant materials.

INDEPENDENCE

When a child has difficulties knowing what to do or what to expect, there may be opportunities to strengthen their language indicators of well-being (particularly in the use and understanding of language and language to regulate emotions on one's own). We can strengthen independence by embedding more visuals, hands-on, movement-based, and relevant, real-life materials.

INITIATION

When a child uses behavior instead of language to communicate, shows limited or no remorse/empathy, and/or displays limited social interactions, this may be an opportunity to strengthen their language indicators of well-being (particularly by expanding the basket of strategies that they have to communicate). We strengthen initiation by encouraging many opportunities to communicate, and the use of multimodal strategies for the child to share what they know, such as visuals and hands-on materials.

For more information on these tools, please visit: www.SEE-KS.com

Let's ENHANCE our Learning Environments

SEE-KS Quick Reference Tool

When opportunities to enhance language indicators of well-being are identified as we NOTICE, MONITOR or SCREEN, the SEE-KS Quick Reference Tool for the "3 i's" of Engagement can be shared with the child, family members, educators, health care providers, and other caregivers so that we can provide developmentally responsive environments.

This freely accessible resource provides the guidance for enhancing everyday routines with strategies to foster engagement for children who are before words (using gestures and body language), emerging language (using words, brief phrases, and sentences with multimodal language), developing language competence (using simple and complex sentences in familiar settings), or fully conversational. Refer to the "How" section of the toolkit to learn how to use this tool when mentoring others.

REFERENCES & ACKNOWLEDGEMENTS

1. Law J, Charlton J, Asmussen K. Language as a Child Wellbeing.
Indicator. Early Intervention Foundation in collaboration with Newcastle University; 2017. Available at:
eif.org.uk/report/language-as-a-child-wellbeing-indicator

2. Owens R. Language Development: An Introduction. 10th ed. Hoboken, NJ: Pearson; 2019.

3. Language development and literacy: Synthesis. In: Tremblay RE, Boivin M, Peters RDeV, eds. Rvachew S, topic ed. Encyclopedia on Early Childhood Development [online]. Available at: http://www.child-encyclopedia.com/language- development-and-literacy/synthesis. Updated October 2018.

4. Morgan PL, Farkas G, Hillemeier MM, Hammer CS, Maczuga S. 24-Month- Old Children With Larger Oral Vocabularies Display Greater Academic and Behavioral Functioning at Kindergarten Entry. Child Dev. 2015;86(5):1351-1370.

5. Chow JC, Wehby JH. Profiles of Problem Behavior in Children With Varying Language Ability. Journal of Emotional and Behavioral Disorders. 2019;27(2):110- 118.

6. Westrupp EM, Reilly S, McKean C, Law J, Mensah F, Nicholson JM. Vocabulary Development and Trajectories of Behavioral and Emotional Difficulties Via Academic Ability and Peer Problems. Child Dev. 2019;91(2):1-18.

7. Starr LR, Hershenberg R, Shaw ZA, Li YI, Santee AC. The perils of murky emotions: Emotion differentiation moderates the prospective relationship between naturalistic stress exposure and adolescent depression. Emotion. 2020;20(6):927-238.

8. Lindquist KA, MacCormack JK, Shablack H. The role of language in emotion: predictions from psychological constructionism. Front Psychol. 2015;6(444):1-17.

9. Snow PC. Restorative Justice Conferencing, Oral Language Competence, and Young Offenders: Are These High-Risk Conversations? Prevention Researcher. 2013;20(1):18-20.

10. Weldon AB, Stimpert KK, Belton W, Galloway-Benefield C, Rubin E, McGiboney GW. Language: An opportunity to strengthen health and development in children and adolescents: a commentary. J Sch Health. 2021; DOI: 10.1111/ josh.12988

11. Hughes N, Chitsabesan P, Bryan K, et al. Language impairment and comorbid vulnerabilities among young people in custody. Journal of Child Psychology and Psychiatry. 2017;58(10):1106–1113.

12. LaVigne M, Van Rybroek G. Breakdown in the Language Zone: The Prevalence of Language Impairments among Juvenile and Adult Offenders and Why it Matters. US Davis Journal of Juvenile Law and Policy. 2010;1127:37-123.

13. Winstanley M, Webb RT, Conti-Ramsden G. Psycholinguistic and socioemotional characteristics of young offenders: Do language abilities and gender matter? Legal Criminol Psychol. 2019;24(2):1-20.

14. Krier JC, Green TD, Kruger A. Youths in foster care with language delays: Prevalence, causes, and interventions. Psychology in the Schools. 2018;55:523- 538.

15. van der Kolk, BA. Developmental Trauma Disorder: Toward a rational diagnosis for children with complex trauma histories. Psychiatric Annals. 2005;35(5):401- 408.

16. Townsend J, Rubin E. Social Emotional Engagement Knowledge and Skills (SEE- KS) for 2018 UDL-IRN Summit Proceedings.

17. Rubin E, Townsend J, Vittori L. Social Emotional Engagement – Knowledge & Skills: Social Engagement Ladder (Whole Group).

18. Di Sante M, Sylvestre, A, Bouchard, C, Leblond, J. Parental behaviors associated with the level of pragmatic language ability of 42-month-old neglected children. Child Abuse & Neglect. 2020;104:104482.

19. Bercow J. Bercow: Ten Years On. An Independent Review of Provision for Children and Young People with Speech, Language and Communication Needs in England. 2018. Available at: http://www.bercow10yearson.com/wp-content/ uploads/2018/03/337644-ICAN-Bercow-Report-WEB.pdf.

20. Goldfeld S, Kvalsvig A, Incledon E, O'Connor M. Epidemiology of positive mental health in a national census of children at school entry. J Epidemiol Community Health. 2017;71(3):225-231. doi:10.1136/jech-2015-207061

21. Hopkins T, Clegg J, Stackhouse J. Examining the association between language, expository discourse and offending behaviour: an investigation
of direction, strength and independence. Int J Lang Commun Disord. 2018;53(1):113-129. doi:10.1111/1460-6984.12330

LANGUAGE AS A MISSING LINK
Part 3: How?

Purpose of this Toolkit

This toolkit is designed for individuals, practitioners, and policymakers to employ practices that apply language as a well-being indicator to improve educational, mental health, and well-being outcomes - and impact quality of life - from birth through adulthood.

Part 1: Why?

Language development dramatically and positively impacts life outcomes. Conversely, the failure to develop a capacity for effective communication jeopardizes emotional well-being and educational attainment. We must institute a new, proactive approach in which all who interact with caregivers and children employ the understanding that language is the primary vehicle for frequent and positive social connections. This approach will consider language as a well-being indicator that is foundational for literacy and academic success, emotional and mental health, and positive quality of life.

Part 2: What?

The toolkit guides us to follow these steps to proactively employ language as a well-being indicator. Practical strategies are provided to enable us to NOTICE language indicators of well-being, MONITOR engagement as a means to proactively gauge language development, SCREEN for potential difficulties with language development if indicated, and use the information gained from screening to ENHANCE opportunities for engagement at home, in the classroom, and in community settings. When children are engaged, their use of language is frequent, functional, socially oriented, and fluid across settings.

Part 3: How?

This toolkit provides tools to implement the "why" and "what" in a manner that is sustainable for individuals, practitioners, and policymakers. This section is designed to help apply the understanding that language is the primary vehicle for frequent and positive social connections. It begins with how we as peers can mentor one another—parent to parent, health care provider to health care provider, educator to educator—to identify what we're already doing to enhance language and to identify opportunities. Several ideas are offered to address the gap between our knowledge of the impact of language and our universal practices and policies in order to apply this vision.

Part 3:
HOW?

"What's working, and how can we do more of it? Sounds simple, doesn't it? Yet, this obvious question is almost never asked."

- Chip and Dan Heath

INDIVIDUAL LEVEL

At the individual level, employing the Language as a Missing Link Toolkit will include the ability to:

NOTICE → **MONITOR** → **SCREEN** → **ENHANCE**

This toolkit provides a freely accessible tool for noticing language indicators of well-being.

The **NOTICE Language Indicators of Well-Being** tool highlights specific aspects of language that are essential to well-being across the developmental continuum (from infancy through adulthood). This resource was developed to support individuals who interact with children in all settings, such as well-child visits, home visiting, classrooms, child welfare, and juvenile justice. Awareness and understanding of language development advances more informed decision-making and expands opportunities to guide practice and policy.

The indicators within this tool are not only related to expressive language, but also receptive and pragmatic language. These relate to a child's capacity to communicate for different reasons (i.e., why a child is communicating), to communicate in different ways (i.e., how a child is communicating), to regulate emotions with the help of others, and to regulate emotions on one's own. It is these aspects of language that determine well-being and set the stage of literacy, academic and emotional resilience.

To **NOTICE** language development is an outcome of action items in the "Why" section of the toolkit, such as expanding the use of strategies in routine well-child visits to the doctor that provide families with guidance about noticing—and opportunities to enhance—language development; providing educators with tools to notice expressive, receptive, and pragmatic language; and supporting use of these tools by child welfare and juvenile justice staff, particularly upon intake into these systems.

INDIVIDUAL LEVEL

At the individual level, employing the Language as a Missing Link Toolkit will include the ability to:

NOTICE → **MONITOR** → **SCREEN** → **ENHANCE**
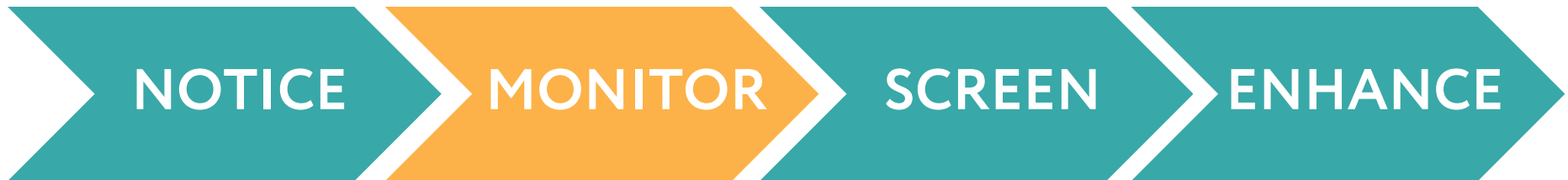
This toolkit provides a freely accessible tool that can be used to **MONITOR** the engagement of an individual or group of children. Caregivers, educators, and health care providers, and others who interact with children on a daily basis can use the **Social Engagement Ladder** to record engagement levels. Refer to the "What" section of the toolkit for instructions and video tutorials for use.

This information can be used to **MONITOR** whether children are socially connected, following social routines, and expressing their thoughts and feelings to others. For children who frequently score **0** (not focused), **1** (emerging/fleeting), or **2** (partially engaged) in daily activities that are interactive in nature, this information can be shared with those who have been trained to complete a brief language screening, such as nurses, social workers, and counselors.

The use of a screening tool may help discern whether language difficulties might be a missing link contributing to their disengagement. Refer to the "What" section of the toolkit for information about administering screening tools.

INDIVIDUAL LEVEL

At the individual level, employing the Language as a Missing Link Toolkit will include the ability to:

NOTICE → **MONITOR** → **SCREEN** → **ENHANCE**

The "What" section of the toolkit includes a list of brief language screening tools.

A language **SCREEN** provides information that might indicate opportunities to enhance engagement as a gauge of language development in everyday routines and activities.

While the results occasionally may warrant a deeper and more comprehensive assessment conducted by a licensed speech-language pathologist, the screening itself may generate an awareness of language vulnerabilities, indicating the need to **ENHANCE** opportunities for engagement in universal settings.

INDIVIDUAL LEVEL

At the individual level, employing the Language as a Missing Link Toolkit will include the ability to:

NOTICE → **MONITOR** → **SCREEN** → **ENHANCE**

In this toolkit, freely accessible tools are provided for individuals to mentor one another to enhance the environment to foster engagement and boost language development.

An **appreciative inquiry** method is embedded in our mentorship format and mentorship materials. Appreciative inquiry refers to a process of change that begins by identifying what is already working, and then supporting the mentee by inquiring where they see opportunities for next steps.

Mentorship might involve having an educator mentor—another educator, a parent mentor—another parent, or a health care professional mentor—another health care professional. This peer-to-peer format is ideal as we're simply noticing what interactive strategies appear to foster engagement, rather than critiquing or evaluating. If the mentorship is used by an instructional coach with an educator or a social worker with a parent, it will be important that one's role as a mentor during this process be identified upfront so the mentee is comfortable being observed and supported.

The Social Emotional Engagement—Knowledge and Skills **(SEE-KS)** approach offers a **Six-Step Mentorship** process that is easy to follow and can be implemented by all who interact with children to mentor one another to appreciate what's working to foster engagement and brainstorm additional strategies to **ENHANCE** engagement.

SIX-STEP MENTORSHIP

The SEE-KS Six-Step Mentorship process is designed to align with adult learning techniques by building upon what mentees are already doing to facilitate interactions and following their curiosity about where there may be opportunities for next steps.

The approach's affirmative nature provides an appeal that generates continued and sustained interest in having these conversations, which reinforces the use of language as a well-being indicator.

Step 1	Step 2	Step 3	Step 4	Step 5	Step 6
Clarify one's role by pointing out or noticing what is already working to foster engagement. Then provide an opportunity for the mentee to identify an aspect of engagement where there may be opportunities to enhance one of the "3 I's" of engagement—Investment, Independence, and Initiation.	Provide an opportunity for mentees to share what they know about a given activity, what they hope the children do with respect to their communication and language development, what is already working, and where there might be opportunities to enhance engagement.	Have a mentor observe the mentee engaging with an individual or group of children, noticing what they're doing that appears to foster investment, independence, and initiation. In appreciative inquiry, the focus is on what is enhancing—not interfering. So, look for those moments that are successful and share those observations.	Mentees are asked where they believe opportunities might exist to enhance engagement within the activity in one of the "3 I's" of engagement.	Once an "I" of engagement is selected, mentors may ask if the mentees have a sense of what they might do to enhance this element or if they want to collaborate. When collaborating, the mentor reads with the mentee the section of the Quick Reference Tool that aligns with the child's language level* and the selected "I" of engagement. This tool provides ideas to enhance investment, independence, and initiation. The mentor can, once again, inquire, "Do you have a sense of where you might go next to enhance engagement, or would you like to collaborate?" to see if additional brainstorming would be helpful.	Create an action plan of next steps that identifies opportunities to enhance engagement. This step provides an opportunity to check in to ensure whether next steps are realistic and resources are available—asking questions like "Can you make it fast? Can you make it last?"

For more information on these tools, please visit: www.SEE-KS.com

PRACTICE AND POLICY LEVELS

At the practice and policy levels, employing practices that apply language as a well-being indicator will include:

- reviewing and updating existing policies, procedures, and practices so that we create the conditions for our children to communicate effectively and be actively engaged,

- providing ongoing training using the toolkit tools to strengthen the capacity of practitioners across all sectors to **NOTICE** language development with the **Notice Language Indicators of Well-Being Tool,**

- equipping one or more individuals to train the toolkit strategies to **MONITOR** engagement within whole group and individual settings, preventing the need for universal screening, while enhancing awareness of mismatches between the child's current language indicators of well-being and the supports available to that child interpersonally and in the environment,

- identifying responsible individuals and providing training and access to tools to **SCREEN** language development when indicated,

- supporting practitioners to **ENHANCE** opportunities for engagement by prioritizing mentorship that aligns with adult learning styles using the **SEE-KS Six-Step Mentorship** framework and equipping them to mentor one another. When an individual is supported in this mentorship framework, they will have the knowledge and skills to support their peers to engage in this process; this sustainability is essential for creating a culture where discussing engagement and language development is part of the culture of a given setting.

REFERENCES & ACKNOWLEDGEMENTS

1. Law J, Charlton J, Asmussen K. Language as a Child Wellbeing.
Indicator. Early Intervention Foundation in collaboration with Newcastle University; 2017. Available at:
eif.org.uk/report/language-as-a-child-wellbeing-indicator

2. Owens R. Language Development: An Introduction. 10th ed. Hoboken, NJ: Pearson; 2019.

3. Language development and literacy: Synthesis. In: Tremblay RE, Boivin M, Peters RDeV, eds. Rvachew S, topic ed. Encyclopedia on Early Childhood Development [online]. Available at: http://www.child-encyclopedia.com/language- development-and-literacy/synthesis. Updated October 2018.

4. Morgan PL, Farkas G, Hillemeier MM, Hammer CS, Maczuga S. 24-Month- Old Children With Larger Oral Vocabularies Display Greater Academic and Behavioral Functioning at Kindergarten Entry. Child Dev. 2015;86(5):1351-1370.

5. Chow JC, Wehby JH. Profiles of Problem Behavior in Children With Varying Language Ability. Journal of Emotional and Behavioral Disorders. 2019;27(2):110- 118.

6. Westrupp EM, Reilly S, McKean C, Law J, Mensah F, Nicholson JM. Vocabulary Development and Trajectories of Behavioral and Emotional Difficulties Via Academic Ability and Peer Problems. Child Dev. 2019;91(2):1-18.

7. Starr LR, Hershenberg R, Shaw ZA, Li YI, Santee AC. The perils of murky emotions: Emotion differentiation moderates the prospective relationship between naturalistic stress exposure and adolescent depression. Emotion. 2020;20(6):927-238.

8. Lindquist KA, MacCormack JK, Shablack H. The role of language in emotion: predictions from psychological constructionism. Front Psychol. 2015;6(444):1-17.

9. Snow PC. Restorative Justice Conferencing, Oral Language Competence, and Young Offenders: Are These High-Risk Conversations? Prevention Researcher. 2013;20(1):18-20.

10. Weldon AB, Stimpert KK, Belton W, Galloway-Benefield C, Rubin E, McGiboney GW. Language: An opportunity to strengthen health and development in children and adolescents: a commentary. J Sch Health. 2021; DOI: 10.1111/ josh.12988

11. Hughes N, Chitsabesan P, Bryan K, et al. Language impairment and comorbid vulnerabilities among young people in custody. Journal of Child Psychology and Psychiatry. 2017;58(10):1106–1113.

12. LaVigne M, Van Rybroek G. Breakdown in the Language Zone: The Prevalence of Language Impairments among Juvenile and Adult Offenders and Why it Matters. US Davis Journal of Juvenile Law and Policy. 2010;1127:37-123.

13. Winstanley M, Webb RT, Conti-Ramsden G. Psycholinguistic and socioemotional characteristics of young offenders: Do language abilities and gender matter? Legal Criminol Psychol. 2019;24(2):1-20.

14. Krier JC, Green TD, Kruger A. Youths in foster care with language delays: Prevalence, causes, and interventions. Psychology in the Schools. 2018;55:523- 538.

15. van der Kolk, BA. Developmental Trauma Disorder: Toward a rational diagnosis for children with complex trauma histories. Psychiatric Annals. 2005;35(5):401- 408.

16. Townsend J, Rubin E. Social Emotional Engagement Knowledge and Skills (SEE- KS) for 2018 UDL-IRN Summit Proceedings.

17. Rubin E, Townsend J, Vittori L. Social Emotional Engagement – Knowledge & Skills: Social Engagement Ladder (Whole Group).

18. Di Sante M, Sylvestre, A, Bouchard, C, Leblond, J. Parental behaviors associated with the level of pragmatic language ability of 42-month-old neglected children. Child Abuse & Neglect. 2020;104:104482.

19. Bercow J. Bercow: Ten Years On. An Independent Review of Provision for Children and Young People with Speech, Language and Communication Needs in England. 2018. Available at: http://www.bercow10yearson.com/wp-content/ uploads/2018/03/337644-ICAN-Bercow-Report-WEB.pdf.

20. Goldfeld S, Kvalsvig A, Incledon E, O'Connor M. Epidemiology of positive mental health in a national census of children at school entry. J Epidemiol Community Health. 2017;71(3):225-231. doi:10.1136/jech-2015-207061

21. Hopkins T, Clegg J, Stackhouse J. Examining the association between language, expository discourse and offending behaviour: an investigation
of direction, strength and independence. Int J Lang Commun Disord. 2018;53(1):113-129. doi:10.1111/1460-6984.12330