

Sosial og følelsesmessig helse i unge voksne med språkvansker

Clinical and Educational implications

Nicola Botting

Med takk til:

Alison Crutchley

Emma Knox Zoe Simkin

Tom Grisaffi Callie Austin-Little

Catherine Pratt Helen Betteridge

Gina Conti-Ramsden

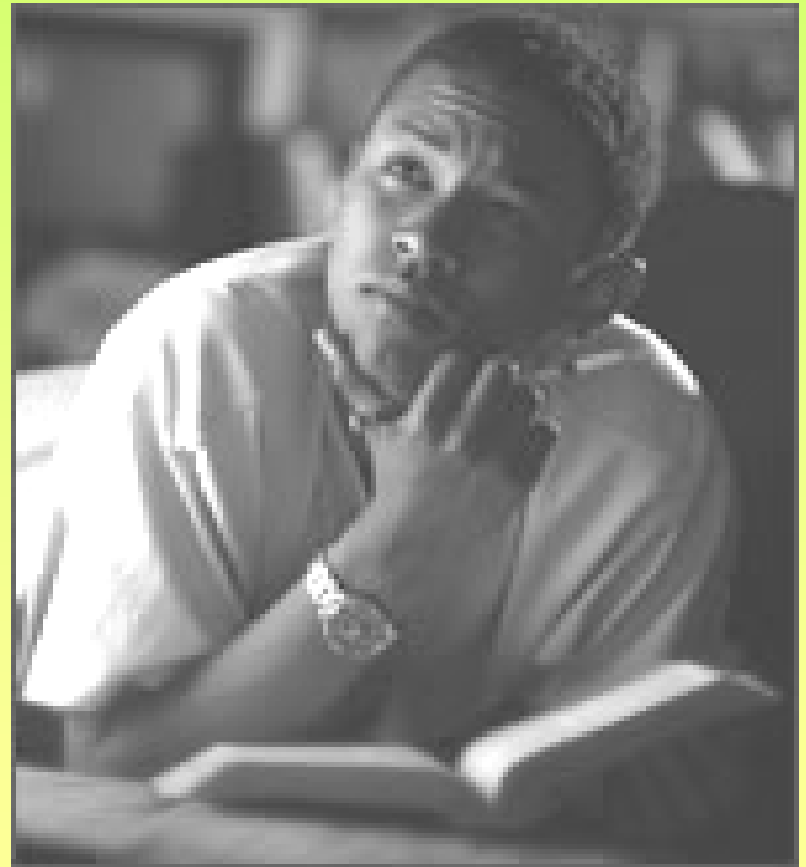
Nuffield Foundation

Wellcome Trust and ESRC

Background

Young People with SLI

- 4-7% of young children have language difficulties
- Incidence greater in boys than girls (2:1)
- Not a homogenous disorder
- A considerable proportion of these children appear to have persistent problems (around 55% of preschoolers continue to have difficulties)



Social and emotional health

- Barn med språkvansker har flere sosiale vanskeligheter:
 - Increased risk of being bullied
 - Lower popularity
 - Difficulties resolving conflicts
 - Poorer social cognition?

Social and emotional health

- Barn med språkvansker har flere følelsesmessige vanskeligheter:
 - Increased anxiety
 - Larger proportion of referred children have language difficulties
- BUT studies are mixed:
 - Snowling et al. (2006) showed no significant social-emotional difficulties

The Manchester Language Study

- Recruited children attending infant language units - aged 7 years of age
- 50% random sample of all such children
- 242 children participated in original stage

The Manchester Language Study

- Original cohort with SLI aged 16
 - Participation of 139 families in the present study
- Comparison Group recruited at 16
 - A comparison group of 124 young people representative of the general population
 - No differences on SES

Social Difficulties

Measures

- Strengths and difficulties checklist: conduct; peer, emotional, hyperactivity, and pro-social scales
- Strange Stories task (Happe)
- (Reading the mind in the) Eyes task -revised



Jealous/ sjalu

Scared/ frykt



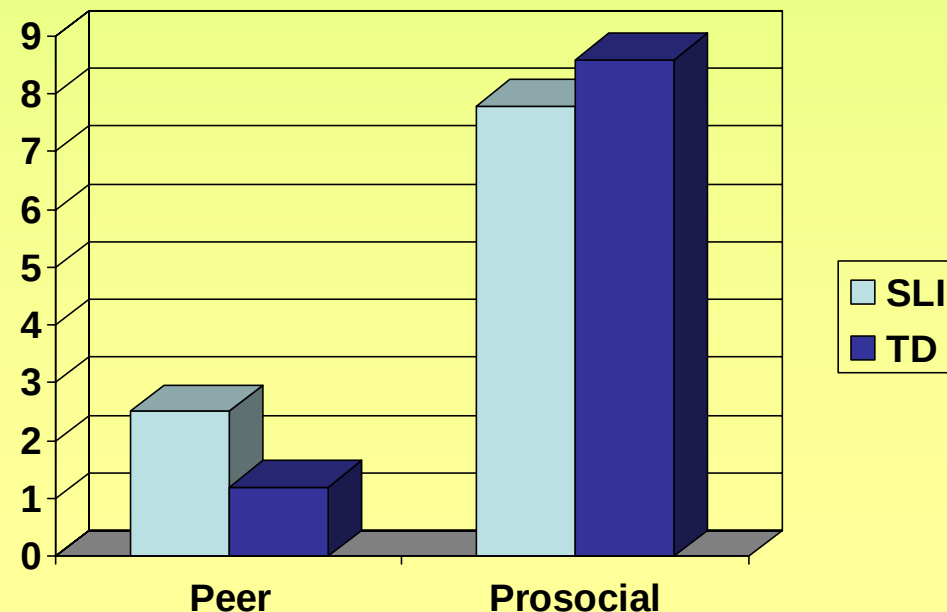
Relaxed/ rolig

Hate/ hat

Key Findings:

Risk of social difficulties

- Clear differences on social skill exist between those with TD and those with SLI
- Strengths and Difficulties Questionnaire
 - Peer scale: difficulties or problems with peers
 - Prosocial scale: active initiation of social situations



Key Findings:

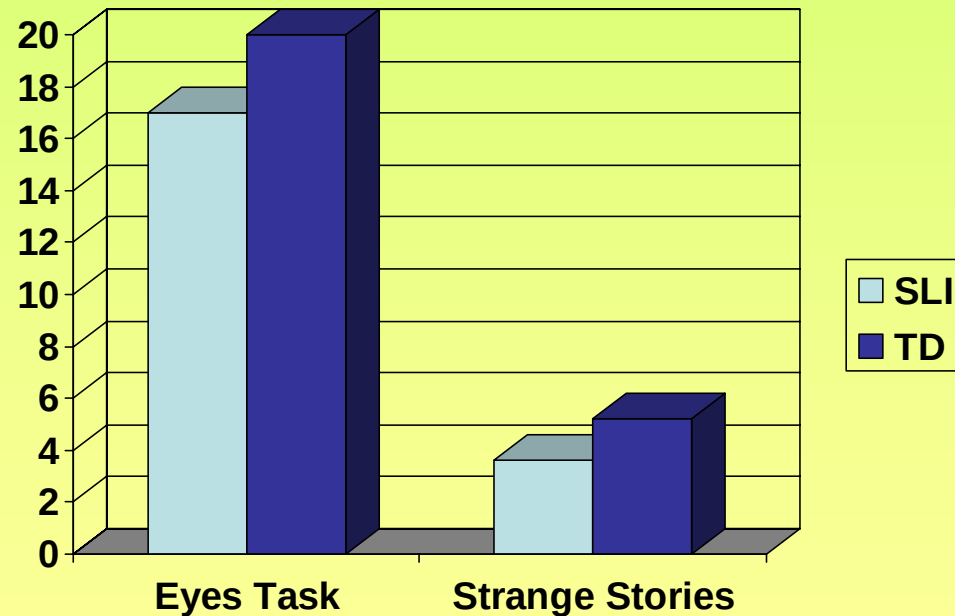
Risk of impaired social cognition

- Clear additional difficulties of social cognition and emotional understanding for those with communication difficulties

- Eyes Task

- Strange Stories

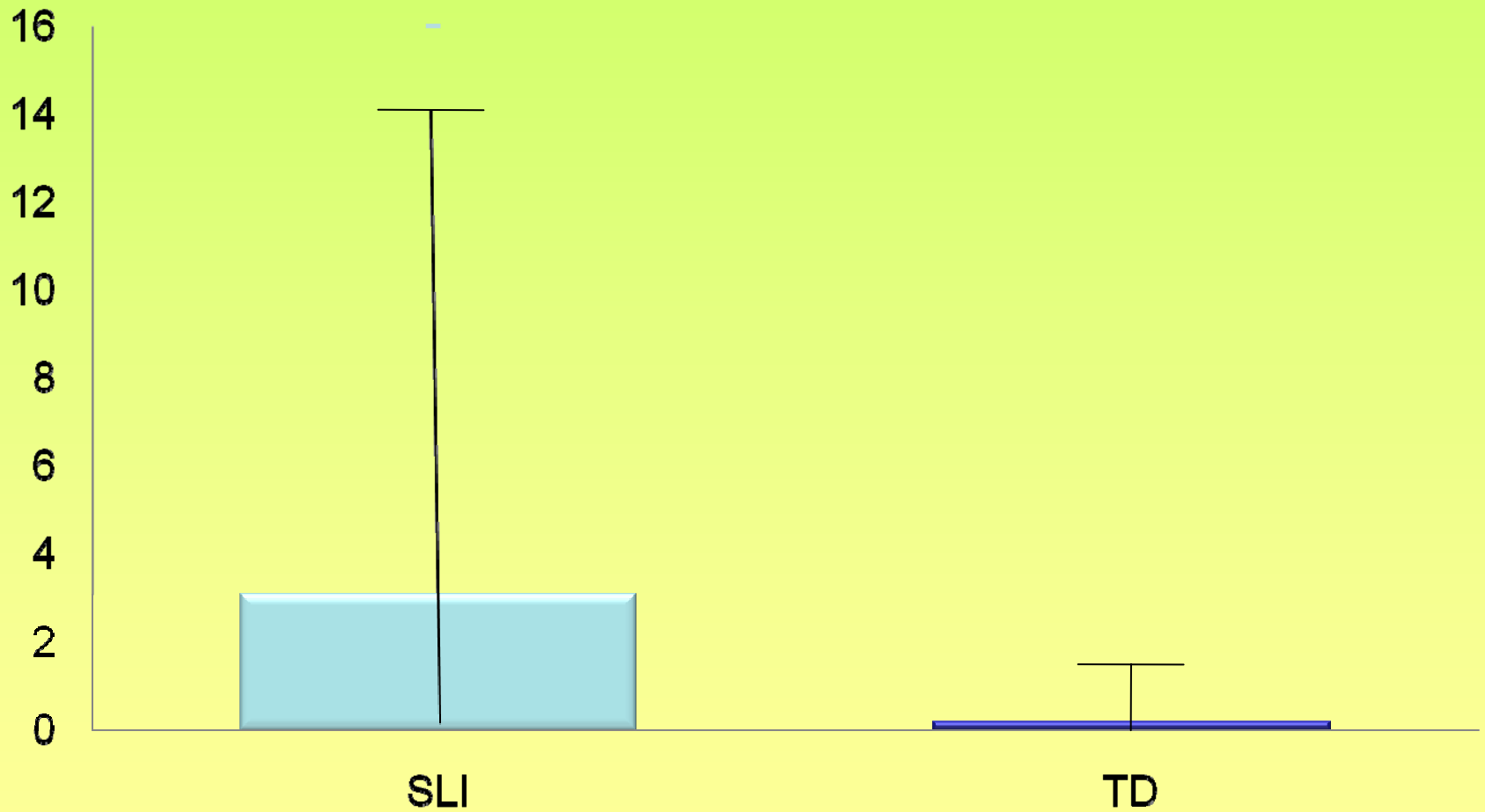
- Both significantly different
- even after controlling for receptive language and NVIQ



Functional social outcomes

- **Friendships** – Quality of friendships; having a close friend; finding it easy to make friends.
- **Social activity** – poor social independence; not getting on with people at school; going out mainly with family; not going out much

Friendships 0-16 scale



Independence

<i>If you were home alone for the day could you:</i>	Proportion answering NO	
	TD	SLI
Go to the local shop and get some shopping?	0%	11%
Get a meal for yourself?	0%	9%
Take a phone message?	1%	13%
Remember to keep a doctors appointment?	10%	33%

Going out

How often do you go out?

At least once a fortnight

- TD: 99%
- SLI: 84%

Who do you go out with?

Mostly with family

- TD: 3%
- SLI: 22%



Friendships and social outcomes

- Some evidence of additional social risks
- However, low levels of anti-social behaviour
- AND...majority showing good friendship quality and typical social activity

Relationships with social outcome 1

	Social Activity	Friendships Scale
Exp Lang	-0.02 0.09	-0.26** -0.07
Rec Lang	-0.01 0.17	-0.17 -0.05
NVIQ	-0.02 -0.13	-0.18* -0.03
SDQ total	0.26** 0.14	0.09 0.08
SDQ prosocial	-0.11 -0.04	-0.21* -0.24**
SDQ peer problems	0.44** 0.10	0.40** -0.09

Relationships with social outcome 2

	Social Activity	Friendships Scale
Strange Stories	-0.25** 0.10	-0.30** -0.16
Eyes Task	-0.12 0.00	-0.29** -0.01
Child Depression Score	0.18* 0.14	0.08 0.12
Child Anxiety Score	0.23** 0.21*	0.09 0.09

Social Implications

- Language is not as clearly linked as expected
- Emotional health and social outcomes show some associations
- Some of the associations differ across groups
- When we think about **social outcomes**, young people with communication difficulties may be dealing with a number of related but different factors: depression; social skill; social understanding and language ability.

Social Implications

- School support is needed for those with persisting and resistant-to-change language problems
- Should there be more emphasis on providing training for facilitating social relationships / cognition?
- Need for support for parents in terms of counselling and parental information/advocacy

Emotional difficulties

Measures



- Two checklists were used:
 - Moods and Feelings Questionnaire (MFQ)
 - Depression symptoms
 - Child Manifest anxiety Scale (CMAS)
 - Anxiety symptoms

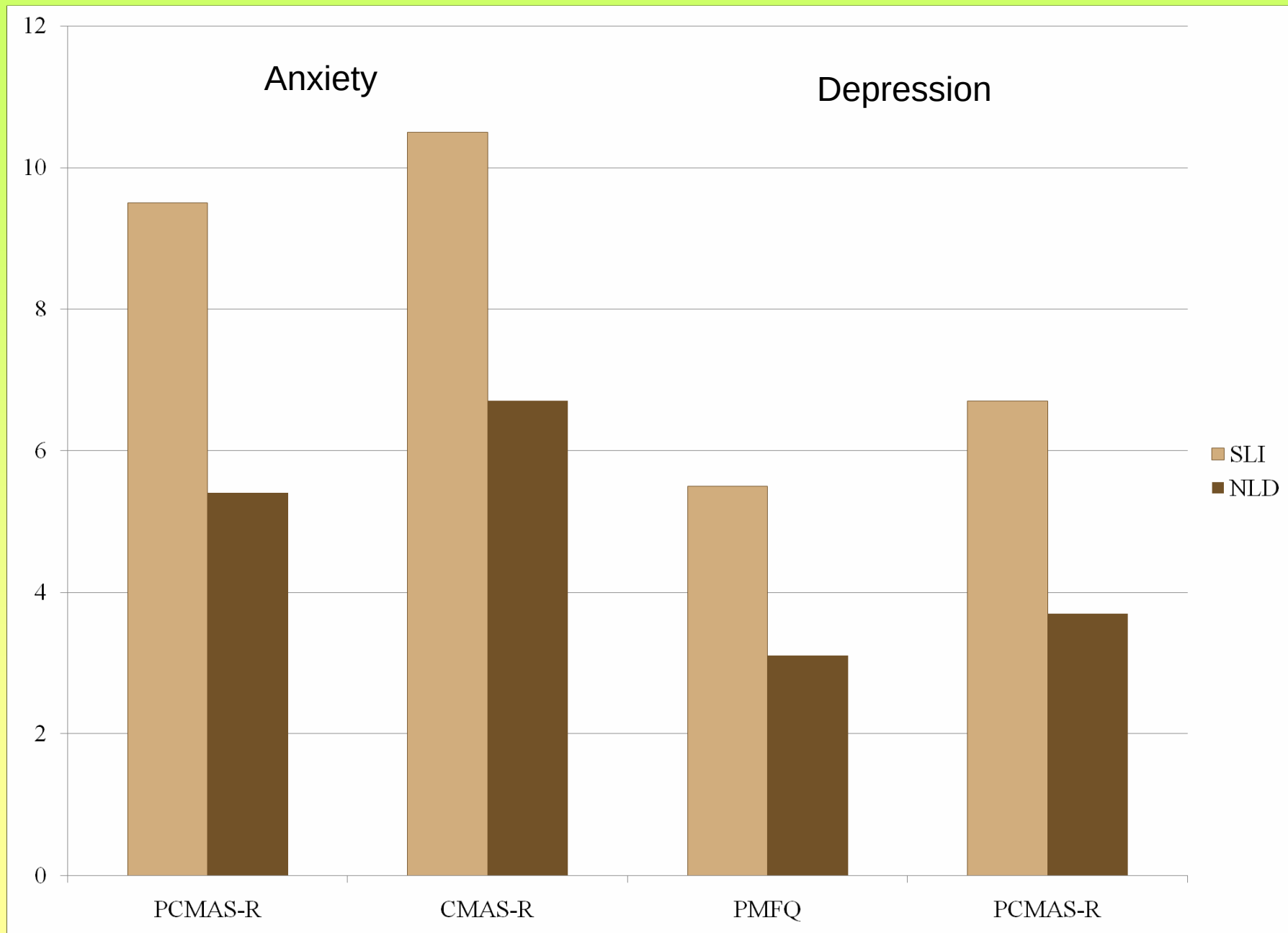
Parents and YP reported on YP emotional health

Key Findings:

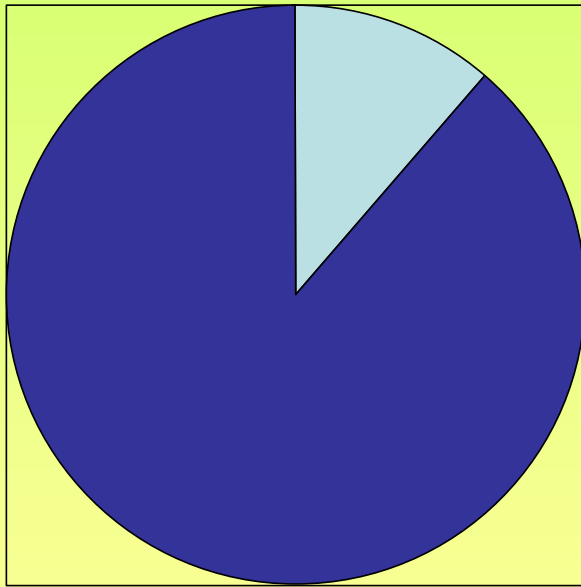
Risiko for mentale helse problemer i tenårene

- ❖ Young people with SLI are an at risk group:
Clear increased risk of emotional symptoms
(anxiety and depression) for the SLI group
(on both self and parent report)

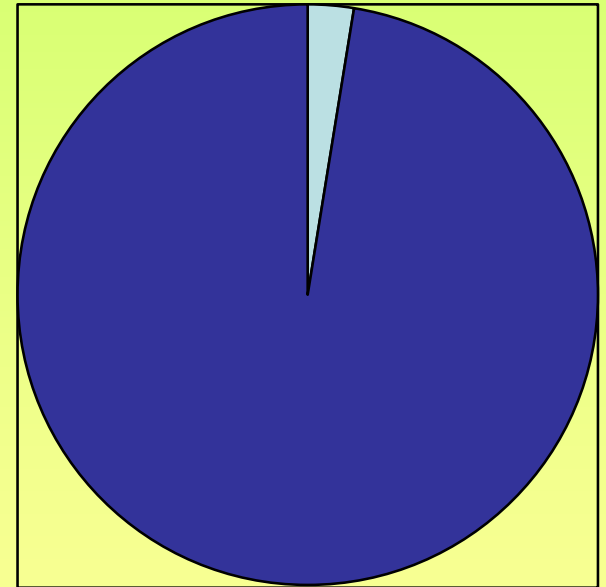
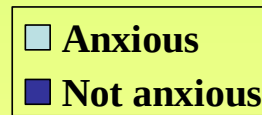




Anxiety



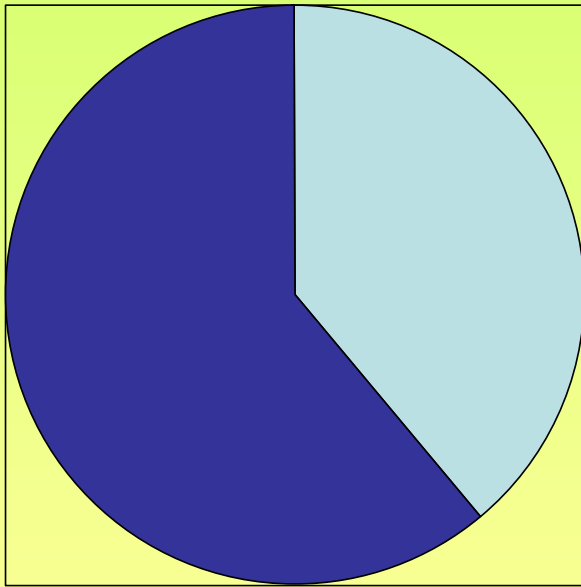
SLI group



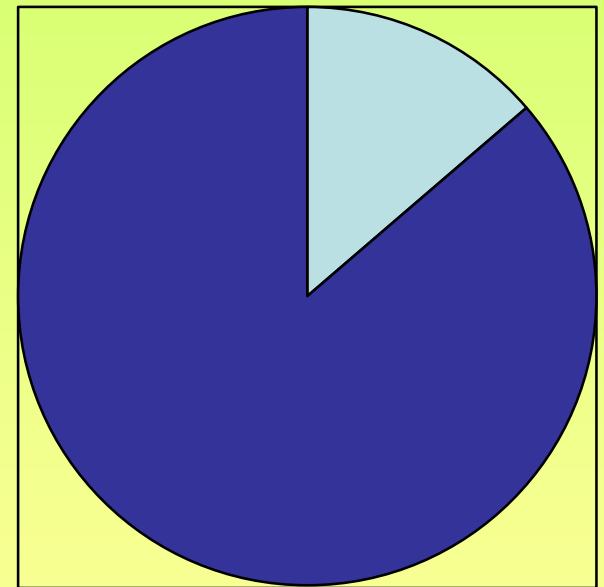
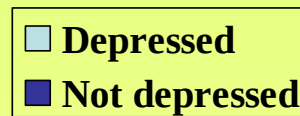
TD group

Fishers exact $p=0.004$

Depression



SLI group



TD group

Fishers exact $p < 0.001$

Relationship between anxiety and depression

- Strong relationships found:

$r=0.73$	SLI group
$r=0.75$	TD group

- More YP with SLI scored high on both:

10% SLI group vs 2% TD group
(Fishers exact $p=0.01$)

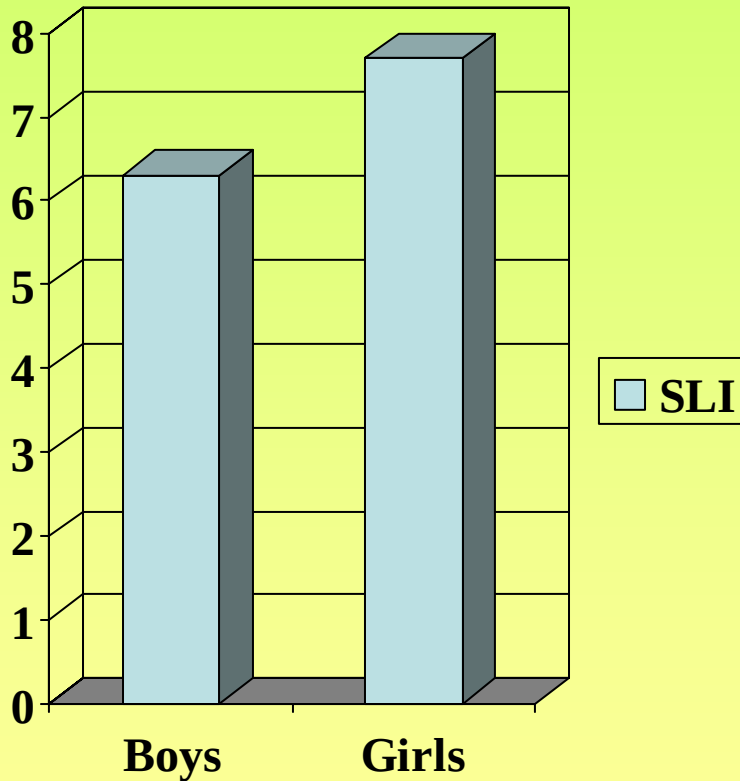
Only 2 YP with SLI had anxiety without depression

Gender

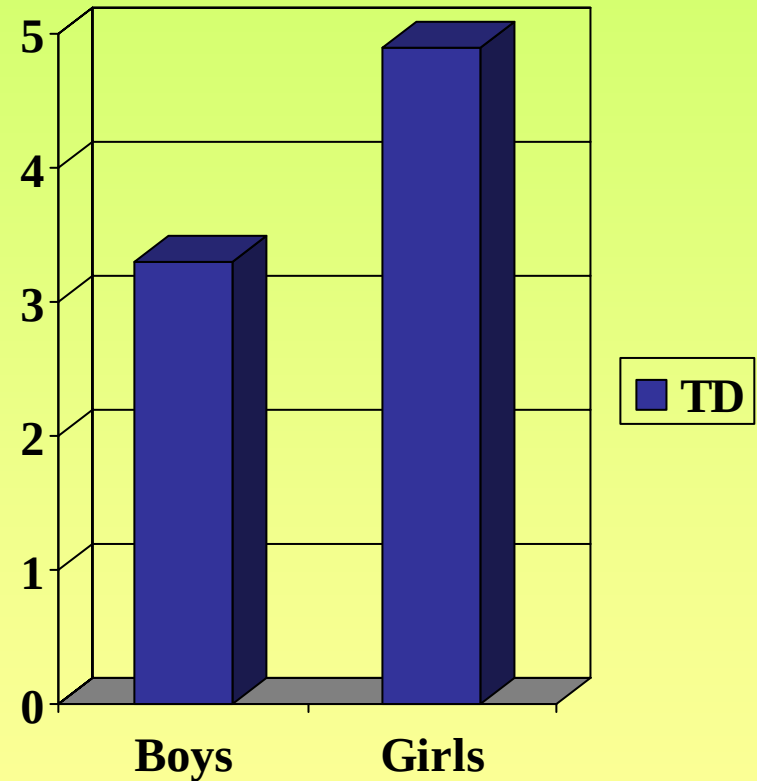
- Girls scored higher on both scales across both groups
- No significant interaction between TD & SLI group x gender BUT....



Gender & Depression



Non significant
cohen's $d < 0.25$



$F(1,122)=4.1, p=0.046$
cohens $d = 0.4$

Key Findings:

Risiko for mentale helse problemer i tenårene

- ❖ Few direct associations were found between language (or cognition) and the development of emotional symptoms: Something puts them at risk but we need to think more broadly than language/cognition

Mental health Implications

- Raise awareness in adolescent psychological services
- Psychologists and psychiatrists to include in their interviews questions about possible history of language and communication problems



Mental health Implications

- Raise awareness in education and SLT that SLI presents a risk factor for mental health problems
- Development of effective interventions and support models for adolescents who have a problem with language and communication and poor emotional health

Hvordan kan disse
utfordringene blir adressert i
praksis?

Afasic Friday Club – a ‘spin-off’ project



With :

- Lucy Myers
 - Shula Chiat
 - Victoria Joffe
-
- Clare Davies-Jones



City University

Afasic

Afasic Youth group

- For young people ages 11-19 although (increasing number of members 19-23)
- Primary speech, language and communication impairments
- Must have the desire and ability to co-operate in social and group activities with appropriate support
- 35 Members: 9 female, 26 male
- Based in London, UK

Participants

- Complete data for 16 parent and young people pairs
- A further 5 parent interviews
- A further 2 young people interviews
- Information on a total of 23 young people either from themselves or their parents
- 8 were 13-16yrs; 15 were 16-23yrs)

Going out

How often do you go out?

At least once a fortnight

Who do you go out with?

Mostly with family

- Afasic Group:

*67%

- Afasic Group

22%

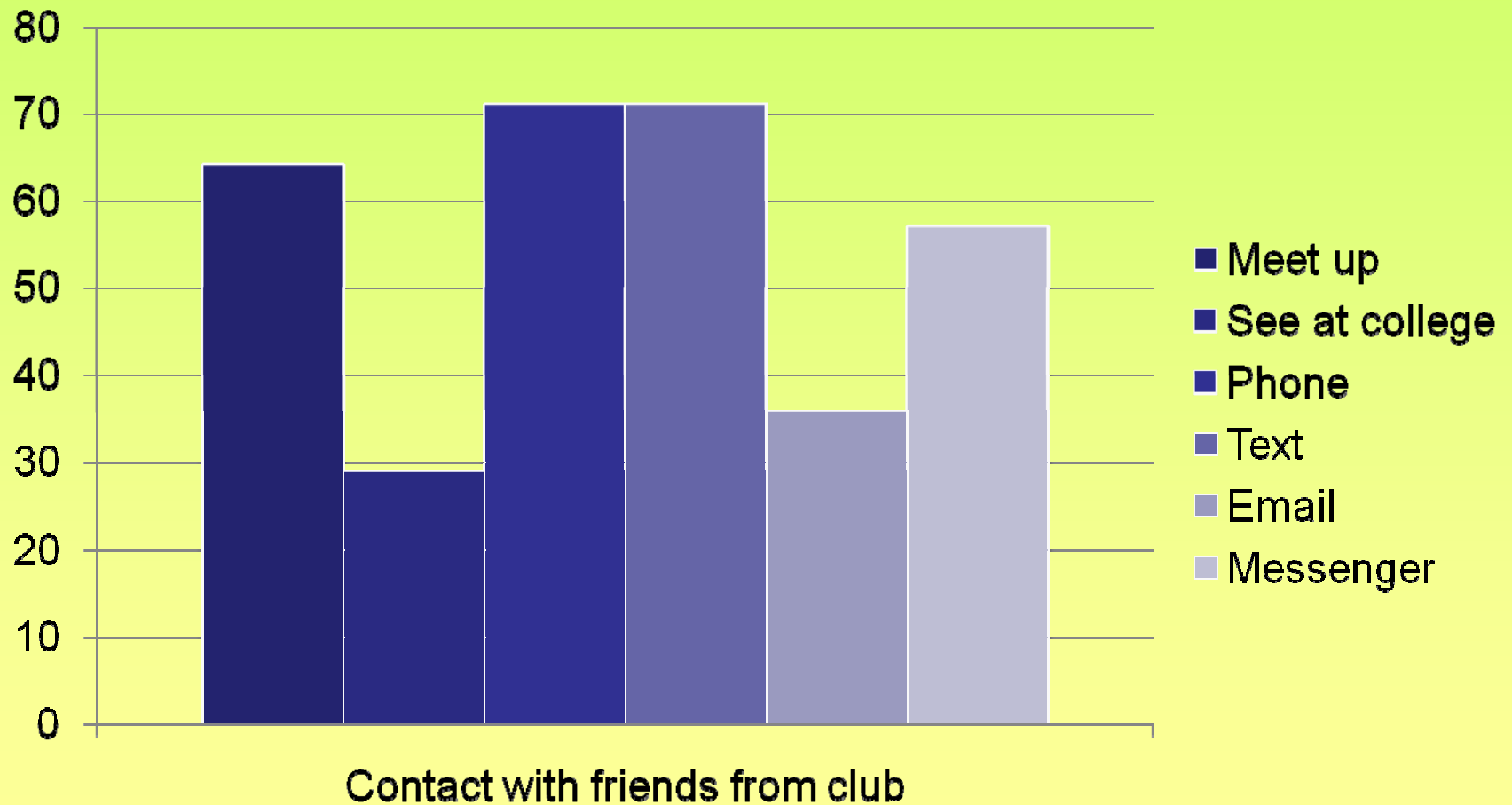
Do you have friends at the club?

97% said 'some' or 'lots'

Friends at Club

- Do you have friends at the club?
 - 97% said 'some' or 'lots'
- Three quarters have contact with club friends at other times
 - Meet up: 64%
 - Talk on phone: 71%
 - Text: 71%

Friendships at club



What makes a specialist club special to its members?

- 89% had been to other clubs (only 6% school clubs)
- A third mentioned the ethos being better
‘lovely and kind everyone cares about everyone’
- Half mentioned the other members
‘people more my type’
- Some mentioned that it was more age appropriate
‘more teenage stuff’

Overall social and emotional health implications

- Social and emotional risks for young people with communication difficulties
- But social skill and functional social outcomes are not always the same thing
- And language doesn't show clear linear relationships with outcomes

Overall social and emotional health implications

- Instead the pattern is one of a complex pathway of risk where emotional health and differing social outcomes crossover
- Associations between these factors may be different for those with communication needs compared to those with TD

Overall social and emotional health implications

- Mental health professionals' awareness and involvement with school teams
- More pro-active levels of parent / family based support beyond 'early years' and into early adulthood
- More non-educational provision needs to be available – especially beyond school age
- Social inclusion – a need for specialist provision?

Nicola.Botting.1@city.ac.uk



Tusen Takk!