CHILDREN WITH SPECIFIC SPEECH AND LANGUAGE DIFFICULTIES - THE TEACHERS' PERSPECTIVE

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Children with specific speech and language difficulties are frequently placed in mainstream classrooms with varying degrees of support. Yet little attention has been paid to class teachers’ views about the children’s problems and educational needs. This paper reports the findings of a two-stage project in two local education authorities investigating the characteristics and needs of children with specific speech and language difficulties (SSLD).

Teachers, educational psychologists, and speech and language therapists in two local education authorities identified 133 eight year-old children who experienced primary difficulties with speech and language. Fifty-nine children and a subsample of 10 children of the same age who attended specialist regional schools participated in further investigations. Each of the children was assessed using a battery of instruments covering language, basic attainments and self-esteem. In addition, their teachers completed behaviour rating scales and an individual interview. The teachers comprised those working in specialist provisions, but also those in mainstream schools. In this paper data derived from the interviews with the teachers supplemented by information from the assessments of the children’s skills will be reported. The teachers faced three challenges: the additional difficulties experienced by the children, their own knowledge gaps, and the barriers to meeting the children’s needs. The implications of the results for inclusive education are addressed.
BACKGROUND

Current research in developmental and educational psychology has made considerable strides in mapping the variation in patterns of development (Broman and Grafman, 1994). A clear message that emerges is that in understanding development practitioners and researchers need to consider both the notion of a reaction range in children’s performance and the importance of the match between a child’s skills and the environmental opportunities. Thus offering appropriate educational interventions requires at a minimum an appreciation of the:

1. Ways in which the child’s difficulties can impact on classroom performance (Licht, 1983; Licht & Kistner, 1986)
2. Ways in which developmental processes depend on the acquisition of previous knowledge and skills e.g. vocabulary for later language development (Bates & Goodman, 1997)
3. Ways in which different patterns of development may change over time (Rondal & Edwards, 1997)
4. Existence of profiles of strengths and needs within individual children (Bregman & Hodapp, 1990; Burack, Hodapp & Zigler, 1988)

A number of elements are required by practitioners to meet these goals: an understanding of particular learning difficulties; an ability to collaborate with other professionals to implement appropriate interventions; and adequate resources to support interventions.

In parallel with these significant advances in our understanding of different patterns of learning there have been major developments in educational policy. As in other countries most pupils in Britain with special educational needs spend much of their time in mainstream classrooms. The move towards inclusive education has highlighted the rights of the children to be educated in mainstream classes along with their peers (Lindsay and Thompson, 1997). Thus, exploring teachers’ knowledge, understanding and behaviour is critical since teachers, ultimately, are the key to educational change and improvement.

Teachers can find themselves in a difficult position. While they hold the major responsibility for teaching the child they may be constrained by circumstance to address children’s needs within defined categories.
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Often such categories reflect medical models and particular diagnostic criteria (Sonuga-Barke, 1998). Moreover, categories rarely come with unequivocal guidance about the educational impact of the child’s difficulties on learning and relationships. Confusions and lack of knowledge about the impact of experiencing different kinds of special educational need are likely to affect both how the teacher works with a particular child and the ways in which teachers collaborate with other professionals (Gemmell-Crosby & Reddi Hanzlik, 1994). However, there are some data to support the view that increased knowledge about school integration and disabilities leads to the formation of positive attitudes towards inclusion (Leyser, Kapperman & Keller, 1994). It is likely that both the nature of the knowledge and the type of experiences teachers have will be critical (see Stanovich and Jordan, 1998 for evidence of the key role of the principal in elementary schools). Both of these issues are difficult (if not impossible) to tap through survey methodology alone.

Despite these encouraging indications there is a well-documented gap in teachers’ knowledge and understanding of the different kinds of special needs that children can have (Scruggs & Mastropieri, 1996) and complaints about the lack of appropriate training of school staff are common (Pearman, Huang & Mellbolm, 1997). As an example a British survey of trainee teachers reported that 96% of the respondents felt unprepared to have a child with Downs Syndrome in their class (Wishart and Manning, 1996). A range of other factors have been identified as barriers to successful inclusion including: time pressure (Pearman et al, 1997); lack of support services, professional skill building, parental contact, support from community resources (Hellier, 1988); insufficient resources and materials, lack of collaboration and negative attitudes, such that regular children would miss out (York & Tundidor, 1995).

General conclusions emphasise the need for practical training and support to make inclusion a successful practice (Yasutake & Lerner, 1996). In a review of 28 different investigations Scruggs and Mastropieri (1996) noted that teachers were supportive of inclusive practices but less willing to have children in their own classes although this varied according to the disabling condition and the implicit demands on the teacher. Studies rarely consider teachers’ needs and understandings for specific children (but see Wishart and Manning, 1996 for trainees). Moreover, when such studies have been carried out (e.g. Vlachou, 1997)
they are generally restricted to a single school or pair of schools. Investigations of different types of special needs in varying contexts, where objective data exist about the nature of the children’s problems, would help us understand the range of problems and demands experienced by the classroom teacher.

One group of children experiencing complex patterns of special educational needs are those with specific speech and language difficulties (SSLD). Delays or differences in patterns of language acquisition have been consistently viewed as indicators of developmental problems. For children with specific speech and language difficulties their primary difficulties are with one or more aspect of the language system. These delays and disorders range from simple sound substitutions to the inability to understand or use language. Speech disorders refer to difficulties producing speech sounds or problems with voice quality. They might be characterized by an interruption in the flow or rhythm of speech or there may be problems with the way sounds are formed. In contrast language difficulties are problems in the ability to understand and/or use words in context, both verbally and nonverbally. These difficulties include improper use of words and their meanings, inability to express ideas, inappropriate grammatical patterns, reduced vocabulary and inability to follow directions (American Speech-Language-Hearing Association, 2000).

No single pattern of language-based problems characterise the children (Conti-Ramsden, Botting & Crutchley 1997; Conti-Ramsden & Botting, 1999; Rapin and Allen, 1987). Difficulties occur with both production and comprehension and these may affect any aspect of the language system i.e. semantics, the lexicon, grammar, phonology and pragmatics (Chiat, 2000; Dockrell & Messer, 1999). These various subcomponents of the language system work together in a dynamic and developmental fashion and may impact differentially on comprehension and production. Thus, for example, delays in lexical acquisition can impact on the fluency of children’s expressive language, while, failures to process key syntactic components may impact on social interaction. Thinking of language as a dynamic system highlights the ways in which even minor problems can impact on a child’s ability to access and contribute to daily experiences and forces us to consider that these difficulties can result in a variety of different developmental trajectories (Leonard, 1997). Children with speech and language difficulties are educated both in mainstream and in specialist provision (Law, Lindsay, Peacey et al, 2000).
Children with specific speech and language difficulties are particularly interesting because, by the nature of their problem, they bring professionals together from health (speech and language therapy) and education. However, there is evidence of mismatch in the understanding of these children’s problems and their requisite needs as indicated by speech and language therapists and educational psychologists (Dockrell et al, 1997). Moreover, these children pose particular problems for primary teachers since their needs are not always obvious. This is particularly the case for comprehension problems where children’s difficulties can be misinterpreted as inappropriate behaviour rather than a failure to understand. Despite a significant amount of research about the nature of the children’s difficulties and continuing attempts to explain the variation within the population (see Bishop, 1997; Leonard, 1997) and consideration of the ways in which teachers and speech and language therapists can work together (Wright, 1992) there has been little attention paid to the knowledge and views of teachers, who are the primary resource for addressing the children’s needs.

Methodological considerations

Studies often comprise surveys of teachers’ attitudes and knowledge, are large scale and typically of North American origin. They rely on teachers’ self-reports of their experiences and their views are captured by ratings on a Likert scale. At an initial descriptive level such data are important (see as examples Villa et al, 1996; Yasutake and Lerner, 1996). These studies highlight general views and problems and, with appropriately designed tools, allow refinement of these views e.g. opinions of particular disabilities and views of inclusion (Berryman, 1989). However such tools are constrained because they determine the types of responses that respondents can make and limit the opportunity for caveats and qualification. The responses do not necessarily translate into views and behaviours in relation to individual children (see Ericsson and Simon, 1980 for a discussion on the need to report on specific events) and are not generally considered in relation to objectively defined educational and behavioural patterns. Forlin, Hattie and Douglas (1996) demonstrated that mainstream teachers saw the inclusion of children with special needs as more stressful than teaching typically developing peers only when they had the daily reality of including these children; teachers who were not involved in inclusion attributed approximately equal stress to
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coping with either group. Moreover, given the range of different special educational needs that children experience there are likely to be problem-specific issues. For example, there is considerable debate among deaf educators, and indeed the deaf community, about the appropriateness of inclusion for this specific group of children (Lampropoulou and Padelladu, 1997). In a detailed qualitative investigation of class teachers’ views of support for children with special needs Richmond and Smith (1990) demonstrated the key role of practical advice and support, while acknowledging the teachers’ contribution, in meeting children’s educational needs. However, the focus on advice and support does not allow an analysis of the teachers’ perceptions of particular problems. To develop further our recognition of the teacher’s position and role a comprehensive view of their knowledge and understanding requires an analysis of attitudes and behaviours related to specific patterns of special educational need and specific examples of provision, as well as more general understandings.

Project aims:

The present study is designed to address some of these gaps by investigating teachers’ views and understandings of a particular group of children with special educational needs - those with specific speech and language difficulties. Moreover in all cases teachers were responding about specific children where standardised data had been collected about their strengths and needs. Thus there were norm-referenced data about the children that served as a comparison for the teachers’ perceptions. Semi-structured interviews with the teachers allowed elaboration of their understandings of the category of specific speech and language difficulties; the nature of the children’s problems, both with language and in other domains; and the suitability of the resources available to meet the children’s needs.

METHODS

Participants:

The participants were identified following an initial survey of educational provision in two LEAs. LEA A is a large urban community in the north of England with one health trust; LEA B spans two health trusts and covers both rural areas and a series of small towns. In the initial survey all educational psychologists, speech and language therapists and year 3 teachers were asked to identify children in year 3 (7 to 8 years
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old) that they thought had a specific speech and language difficulty. The following guidelines for identification were provided:

1. The child has a discrepancy between their level of functioning in the area of speech and language and that which would be expected given the child’s functioning in other areas
2. Is at stage 3 or beyond of the code of practice, or who you feel should be at this stage

A total of 133 were identified at this stage of the project (Dockrell & Lindsay, 2000) from which a subsample of about 30 from each LEA was derived. The aim was for a representative sample of the original professional referrals but excluding children with other complicating factors such as a diagnosis of autism, sensory impairments or genetic disorders. In addition, children where English was an additional language or children who fell outside the age band for year 3 were excluded. The total number of children excluded on this basis was 51 (30%) of the original sample. We attempted to make contact with all the remaining families. Twelve parents (9%) declined to participate in the study and we were unable to contact eleven (8%). The sample thus consists of all remaining children who were identified as having a primary speech and language difficulty and no other documented continuing factors that could affect language development. The current analysis reports on data collected from this subsample (n=59) and a further 10 attending residential school for children with severe speech and language difficulties for comparative purposes, a total sample of 69 children.

Teachers:

Interviews were undertaken with the teachers of 69 children, 59 attending schools in the two Local Educational Authorities and 10 in 2 regional special schools, who had been identified as having specific speech and language difficulties.

Children:

Seventeen girls and 52 boys were involved in this phase of the study; 33 from LEA A, 26 children from LEA B and for comparative purposes 10 children attending residential schools for children with severe speech and communication disorders. At time of testing, the children had a mean age of 8;3 (range 7;6 - 8;10). All children
were on the special educational needs register, with 88% of the participants at Stage 3 or above and 54% had statements. The LEA sample included children in mainstream, special schools and attending integrated resources or units attached to mainstream schools.

PROCEDURE

Teachers:
The teachers interviewed had direct responsibility for the target children, as either class teacher, or as Special Educational Needs Co-ordinator (SENCO), but they were not necessarily the teacher who had identified the child initially. They completed a semi-structured interview and three standardised scales: The Junior Rating Scale (Abraham and Lindsay, 1990) examining the children’s language, educational and behavioural development, the Strengths and Difficulties Questionnaire (Goodman, 1997) and the Pictorial Scale of Perceived Competence and Social Acceptance for Young Children (PSPCSA: Harter & Pike, 1984).

Children:
The children were tested on a number of measures covering the range of socio-educational dimensions. These measures were chosen to reflect both the initial identification procedures and to investigate the extent to which the child’s language difficulties impacted more widely on their behaviour, ability to access the curriculum and self-esteem. As such tests were chosen that assessed dimensions of the language system, non-verbal ability, academic attainments (numeracy and literacy) and social-behavioural development. These measures are presented in Table 1 and were specifically chosen tests that are conventionally used by practitioners in Britain.

INSERT TABLE 1 ABOUT HERE

Semi-structured interview and coding of interviews:
Development of the coding system was an iterative process where interviews were read and a coding system constructed. Two researchers using interviews with which they were unfamiliar then tested this system. The process was repeated until a comprehensive coding system to address the issues was constructed (see appendix for final coding system). The key issues addressed in the interview were –
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1. the teachers’ understanding of specific speech and language difficulties,
2. their training in the area and their experience of children experiencing such problems,
3. the strengths and needs of the child they were currently teaching,
4. the ways in which the child’s needs were being met,
5. resource implications and liaison with and support by other professionals.

RESULTS AND DISCUSSION

Teachers’ Understanding of Specific Speech and Language Difficulties

Teachers had a variety of working definitions of the term ‘specific speech and language difficulties’. The teachers’ responses were categorised into four groups:

1. those who reported never hearing the term or not knowing its meaning (21%)
2. those who provided a response but either repeated the words speech and language or drew an analogy with specific learning difficulties (19%) e.g.
   ‘it implies things, like specific learning difficulties implies’ (B25)
3. those who focused on speech or vocalisation alone (15%) e.g.
   ‘Unable to vocalise what most people can vocalise, I presume’ (A3)
   ‘Difficulty in saying particular sounds’ (B1)
4. those who provided more detailed definitions reflecting elements of expressive and receptive language (45%)

Within the latter group a wide range of descriptions varying in focus and complexity were included e.g.

description of expressive difficulties focussing on clarity of expression
   ‘You can’t really understand what they’re saying’ (A20)

referring to the specific nature of the problem
   ‘It’s a specific difficulty as opposed to a general learning difficulty, directly related to ‘language delay’ (B9)

a more detailed analysis of the problem
   ‘Very specific individual needs so it may be phonological, or it may be linguistic, or word-finding difficulties. There are a variety of things that are very specific’ (A28)
‘A kind of sound or phonology disorder of language and understanding’ (B10)

a reference to associated curriculum difficulties

‘Covers all areas of language understanding, articulation and speech, also poor reading skills (B13)

Finally, a teacher in a special language facility provided the fullest definition which related SSLD to ‘complex communication difficulties’, a term used in the authority for children on the autistic spectrum. She highlighted the difficulties of attempting a differential diagnosis.

‘A language or communication disorder that doesn’t necessarily extend into what’s described as the complex area of communications disorder, but practising as much as I do with these children, I feel the boundaries blur anyway so I sometimes think it’s a label that can apply to some children perhaps on a certain end of the spectrum, then complex on the other end, and in the middle there’s very much a blurring. I think for instance children with complex difficulties have particular difficulties in the area of social interaction, and in many children, specific speech and language difficulties inevitably end up with social interaction difficulties’ (A32).

These definitions from teachers clearly show a wide range of views about specific speech and language difficulty. Forty per cent of the teachers did not feel able to provide any information about speech or language at all. Fifteen per cent of the definitions focussed only on speech while the others focussed on language or speech and language. Teachers’ definitions did not represent the standard definitions that refer to discrepancies between the child’s language and non-verbal intellectual abilities. The teachers who discussed the ‘specific’ nature of the problems came closest, but the last teacher provided the definition that was most comprehensive (A32 above). Where definitions were provided they tended to be partial definitions often omitting important defining features. The teachers, themselves, were not comfortable with the extent of their knowledge and experience of these problems. The patchy nature of the teachers’ knowledge is of significance when the wider ramifications of such difficulties are considered.

**Gaps in Knowledge and Experience**

Twenty-seven per cent of the teachers specifically identified gaps in their own knowledge and expertise. These were classified into three categories: the nature of the problem, issues around appropriate intervention, and delegation of responsibility. Examples are provided in Table 2. Teachers reported problems in understanding the nature of the child’s difficulties given that these were often not just with
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language but more complex combinations. Teachers reported that they were also struggling to know how to intervene successfully. They generally felt unclear about their responsibilities and those of other professionals and the LEA. Thus while some teachers had working definitions to guide their classroom practice it was clear that uncertainties existed.

The Children’s Language and Literacy Skills

The mean T-score for the sample’s non-verbal intelligence measure was 42 (range of 20-64, SD 9.2) indicating that on the whole the sample were performing within the average range (where T=50 is average, SD=10 on the standardisation sample). However, as Figure 1 shows there was a negative skew in the distribution. The distribution of average and below average scores did not vary significantly across the areas.

The results of the language measures are presented in Table 3. As the table indicates on all measures, over 60% of the children were at least one standard deviation below the mean apart from the Bus Story Sentence Length. The degree of the children’s delayed development can be seen from the average age equivalents which ranged from 4;4 years to 6;1 years (apart from the Bus Story Sentence Length) when they had a mean chronological age of 8;3. Even for the Bus Story Sentence Length, the average age equivalent was only 7;0 years. About half of the children scored below the 16th centile on subtests on the phonological measure used (range 47 to 61 per cent). The ranges for each measure are large but in all cases as indicated by the average centile and age equivalent the distributions are skewed so that few children score above average. For example, on the TROG, with an average centile rank of 15, 30% of the children score at the 1st centile or below, while only two children score above the 50th centile on this measure. Only two children did not score outside the average on one or more of the standardised language measures. Both these children were in mainstream provision, both were on stage 5 of the code of
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practice. The information on their initial identification highlighted problems with two dimensions not directly measured by the assessments, pragmatics and verbal dyspraxia.

The children’s difficulties were much broader than those that could be restricted to speech or articulation alone. Using the TROG and the BUS story as indicators of wider problems: two-thirds of the sample had problems with the comprehension of grammatical constructions (as measured by a score of -1SD or greater) and 80% had problems with providing age-appropriate information in continuous speech. Hence in the majority of cases teachers were dealing with children with substantial language difficulties. Although the teachers did not refer to the notion of discrepancy between non-verbal and language abilities, the majority of the children fell broadly within the category of SSLD as defined by discrepancy analyses.

INSERT TABLE 3 ABOUT HERE

A similar pattern of delay was found for attainments in literacy and numeracy. For numeracy the children recorded a mean age equivalent score of 6;112 equivalent to a mean delay of 1;4 years with 20% (14) scoring below 6;0 and 6% (5) scoring below 5;0. Children experienced greater problem with literacy with 13% of the children failing to score at all on the MIRA accuracy scale and 38% failing to score at an age equivalent of 5-years.

**Teachers’ Views of the Children’s Difficulties**

How then did these teachers’ views match the difficulties experienced by the children in the present sample? As previously stated the teachers’ views were collected through a semi-structured interview and three scales. If we consider the scales first we find that the children in the sample were scored consistently low across all measures on the Junior Rating Scale, with greatest discrepancy from the standardisation sample being for the language/education subscale where 88% were rated below the 16th centile of the standardisation sample and 29% below the 3rd centile. There were significant correlations between the teachers ratings on the language and education dimension of the Junior Rating Scale and all the children’s
scores attainment measures: early number scale (N=55, r=.46, p.<.001), spelling (N=57, r=.60, p.<.001), reading accuracy (N=35, r=.35, p.<.04) and reading comprehension (N=35, r=.60, p.<.001). Relationships with the language measures were less obvious. While there were correlations with the majority of the phonological dimensions as measured by the PhAB subtests (alliteration N=57, r=.46, p.<.001; rhyme N=57, r=.40, p.<.01; semantic fluency N=57, r=.27, p.<.05; alliteration fluency N=57, r=.36, p.<.01) only two expressive or receptive measure of language skills correlated with the teachers’ ratings on this scale: the Bus story information score (N=54, r=.47, p.<.001) and the TROG (N=57, r=.30, p.<.001).

The teachers’ ratings therefore showed a large measure of agreement with the results of the standardised tests in terms of the children’s educational achievements and to a lesser extent with their language. Results of the Strengths and Difficulties Questionnaire indicated an enhanced level of behavioural and social difficulties with 30.2% of teachers rating the children as abnormal on the Total Difficulties score. On the PSPCSA the children’s perceived physical and cognitive self-competence was rated significantly lower than the child’s view of themselves (see Lindsay & Dockrell, 2000 for a full discussion). However the interviews offered a broader insight into the teachers’ understandings of the children’s problems.

**Primary problems**

All teachers acknowledged that the children had significant difficulties with language, except one who reported the child had improved greatly over the year. The teachers reported a wide range of language problems with varying degrees of specificity. Descriptions varied from general statements such as

- ‘He needs help with his speech’ (B11)
- ‘Extremely immature speech’ (A9)
- ‘He wasn’t speaking properly’ (A10)

to more analytic descriptions of the child’s language -

- ‘I would call it lack of communication rather than speech problems that she had. I think she can make the sounds. I think she’s got a lot of bad habits’ (A4)
- ‘His pronunciation of words’ (B4)
- ‘She also had difficulty saying certain letter sounds which wasn’t helping the grammatical side’ (A10)
‘He doesn’t have the vocabulary in his wordbank’ (A11)

Others used more specific terminology -

‘In J’s case with the pragmatic disorder’ (B5)

‘He’s got expressive and receptive difficulties’ (A13)

‘They’ve told us he’s got verbal dyspraxia’ (A14)

The teachers’ descriptions of their children’s language difficulties were very varied, reflecting both their own levels of understanding as described earlier, but also the range of children’s problems in the language domain as measured by the standardised assessments.

Other Primary problems

The sample selection process was designed to identify children whose main difficulty was specific speech and language difficulties (SSLD), and hence all children should have this as their primary problem. However, there were three factors that might affect this. First, another professional may have identified a child, and hence the teacher’s perspective might be different. Second, even when the identifying professional was a teacher, the interviewee may differ. Third, the child’s earlier language difficulties might have reduced and the teacher may now view another domain as the primary area of concern.

In fact, very few children were identified as having other primary problems. In the only case where the teacher considered the child not to have a SSLD problem, the primary problem was attributed to aggression and later emotional difficulties. In three other cases, behavioural difficulties were viewed as very significant and of co-primary importance currently, e.g.

‘Severe receptive language disorder, which has resulted in an incredible amount of rigid behaviour and insecurity’ (A34).

Small numbers of children were considered to have other primary problems in association with SSLD. One girl had significant visual difficulties, two children had very poor auditory memory, and three were described as having learning difficulties in association with SSLD.
Associated Problems

We also asked teachers to report on other problems in addition to primary language difficulties. In this case, many children were reported by their teachers as having such difficulties, albeit that the numbers in any one category were relatively small (see Table 4).

INSERT TABLE 4 ABOUT HERE

Given the results of the standardised assessments there is a relatively low recorded incidence of individual associated problems by the teachers. Moreover these associations vary between individuals suggesting that rather than any straightforward pattern of co-morbidity the children present complex patterns of needs in the teaching context.

Children's strengths

Despite the unequivocal normative evidence of poor academic performance, strengths were identified by 18 of the teachers, and only one specifically stated that the child had no particular strengths. These positive attributes covered a wide range of areas. In two cases, the child’s sporting ability was highlighted:

‘he’s very good at PE’ (A3)

A teacher in a joint interview with a colleague saw such ability as a protection against possible teasing.

Teacher 1.

‘I would have thought some of the children in the class, they can be quite cruel, and would have made fun of him, I really would, but they don’t, he just seems part of the gang’

Teacher 2.

‘I think the fact that he’s good at sport and things, and he does mix well, and he’s good at art, he has got some strengths, but they’re certainly not in language’ (A13)

Social competence was mentioned by one teacher - ‘socially she is great’ (A37) while a positive attitude was also seen as important

‘They’re both very patient and tolerant and respond very well to adults by saying just a minute, I didn’t quite catch
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that’. They have a lovely attitude and they both try very hard. It makes a big difference with them being on our side’ (A24, A25)

‘I think basically his attitude is his main strength. He’s very willing and he’s a battler as well’ (B13)

Basic skills were also mentioned in some cases

‘The stories he writes are very imaginative...the work he produces is really neat (B11)

In addition, a number of teachers mentioned literacy as being a relative strength, but in comparison with different factors. In one case strength was an improvement in performance:

‘his reading has come on, he can now read, he couldn’t read when he came in’ (A14)

‘whilst he has difficulties in written language...often get good ideas about what to put down’ (B27)

Another boy was reported:

‘On reading he’s streets ahead of a lot of the class’ (A17)

although it was also reported that he was behind his chronological age equivalent.

Maths competence was also mentioned. One child was ‘brilliant’ (A30) and able to manipulate large numbers mentally, while a second had

‘his hand up all the time if I’m doing simple number because he knows he can do it’ (A17)

Another child was described as having competent skills across the board. Having been in this special language school for some time, he was considered to have improved greatly and be ready to leave.

‘... Within the group he is extremely competent compared to the children, an extremely competent child, with his literacy skills and with his maths and in terms of really sussing what should be happening’ (A33)

or

‘he’s very bright and his maths is fine’ (B7)

While strengths were identified in about half the children, it is of interest to note that these were not clustered around any particular area of development. Rather, small numbers of children were associated with different aspects. The most prevalent reference was to literacy, often with specific reference to improvement relative to earlier performance. The children were not reported as having strengths relative to a full population of 8-year-olds, but compared with their own earlier performance, or against the norms
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of a group of similar children, as in special language schools and units.

How Prepared Were the Teachers To Meet the Children’s Needs?

The general picture with respect to teachers in mainstream was of very limited, on-the-job training. Only five of the teachers from the LEA samples reported any specific training on speech and language difficulties. This was exemplified by comments such as the following.

'I've picked things up as I've gone along' (A2)

'You know you pick it up as you go along' (B22)

'It would be helpful to know what could be classified as normal development or something that needed to be looked at in more detail' (B1)

'We had an hour. A lady who was very good came in to go through articulation that she feels will help S and I think she's right, but after an hour it's a nonsense really' (A4)

'Just things I learned on the job. I did my dissertation on speech problems but it's years since!' (B14)

'Very cursory, only part of general English' (B32)

'None at all' (A24)

It was also noticeable that some teachers interpreted this question more broadly and related it to any training in special needs. Some teachers, usually fairly newly qualified, referred to their initial teacher training, but with the same level of limitation and generalisability to SEN.

'We had a little bit of training. I've only been teaching two years. We had a little bit of input at college on things like dyslexia but that was maybe a couple of lectures only of a four year course so it's very limited' (A16)

Visiting professionals, especially SLTs, were mentioned as providing informal training.

'Most of the training has just been talking with communication therapists when they came in' (A17)

A small number of teachers were working either as specialist support teachers or in special language facilities, but even here there was a lack of specialist training. One teacher was also qualified as an educational psychologist and had undertaken short courses on speech and language difficulties, and three others had undertaken short courses. However, none had undertaken intensive, long-term courses of training.

'we need somebody who is full time who is education based, who is able to put in time with staff to do the staff training'
MEETING THE CHILDREN’S NEEDS

Teachers identified a number of factors that they felt resulted in problems meeting individual children’s needs. In only 6 out of the interviews were no problems reported. Teachers identified gaps in their own knowledge and expertise. Teachers’ responses were coded into 8 mutually exclusive categories. In addition there was a ‘no problem’ and an ‘other’ category. These are presented in Table 5. In this section we focus on support related issues since these were highlighted by 49% of the sample.

Support Related

 Provision of support was found to be dependent on several factors, but it was not easy to determine a straightforward pattern. Firstly, there were differences between teachers in mainstream schools compared with those in special language provision with the latter having smaller classes and speech and language therapists on site. In between were those schools which had Integrated Resources (IR) for children with SEN, although not specifically for SSLD. In such cases, the expertise and provision of support within the IR might be called upon to supplement that available in the mainstream school.

In considering the support a number of salient themes emerged. Overall the level of support in mainstream schools varied but the quantity was often very limited. This might be the class teacher effectively working unsupported.

Teacher  ‘He does have a few minutes each day when we do get an extra bit of help for him with some language skills.

Interviewer  Is that what you’ve managed to pull together as a school?

Teacher  ‘Yes. It’s not really provision being given for him but we've managed to squeeze it out of somewhere else.

Interviewer  But that’s quite minimal?
However, other schools provided more support, even if this too was drawn from its general SEN time.

'The CCA takes him out of the classroom and plays games with him, does language exercises with him and then does his PE with him as well' (A14)

'With the CCA three mornings a week' (A15)

'There really is no specified time but roughly I suppose between 1/2 hour and 40 minutes a week extra time now that he can be in a group' (B17)

Others made use of volunteer parents, a student and a retired teacher, but the classroom care assistant (CCA) was the most common extra support. Yet there is no reason to suppose that the CCA was specifically prepared to meet the child’s needs. The special educational needs co-ordinator was also important. In some schools they ran groups that the child would attend. These might be frequent and in some cases include individual work, but the class teachers did not always know what went on during these sessions.

'I’m not sure what work they did, but I’m sure it’s similar to what I try to do in the classroom' (B15)

How was the support structured?

Withdrawal was a common approach to supporting the child. This might be done for one of two reasons. Firstly, for the purpose of receiving a particular input which might only, or optimally, be delivered in such a setting or, secondly, because the classroom, with 30 plus children, was considered an unhelpful environment in which to help the child develop:

‘Needs individual time. He works quite well in a small group but in class it has taken all year to build his confidence’ (A25)

‘He needs that small class situation. The quiet’ (A11)

However, support was provided in class, in some cases, but again this may be because of the child’s difficulty in meeting the demands of that setting without such help.

‘He is really excluded from most areas of the curriculum unless somebody is working with him one-to-one, and that’s impossible so we’re not meeting his needs’ (A6)

In some cases the support provided by the class teacher, SENCO or CCA was guided by an external
professional, most commonly the SLT or a support teacher visiting the school.

'I try to follow a language programme for her worked out with the communication therapists' (A4)

'Ideas and work are given to us by the SLT' (A15)

This was an area where the teachers in the specialist language provision were at a distinct advantage. Such support might be interwoven into ongoing professional collaboration, with frequent opportunities to discuss the child, although even here the time for collaboration with educational psychologists (EPSs) was very limited.

'we work very closely (with SLTs) ... They (the children) have contact with the therapists individually' (A5)

In this setting, feedback and collaboration were facilitated.

'We collaborate regularly on planning work, communication aims, that will extend obviously into the area of literacy and maths and science, or the topic work. We also acknowledge that two-way learning process between the learning needs as perceived by the class teacher and the language and speech development needs as perceived by the therapists and we integrate our work totally' (A32).

Provision of specialist support - Speech and Language Therapy

There are a number of models of SLT support for children with SSLD that reflect both practicality (e.g. mainstream versus special facility), and professional preference (e.g. in-class versus withdrawal). These may interact, with an SLT perhaps operating in a manner not of their choosing because of constraints. Nonetheless only 17 of the teachers in the LEAs, from both mainstream and specialist provision, reported direct involvement with speech and language therapists. Some teachers reported that the only input from the SLT, of which they were aware, was an assessment, perhaps followed by a report. The more common pattern was for the SLT to follow up an assessment with a ‘light monitoring’. This may be infrequent, possibly owing to limited time.

'Yes (SLT) I think would come in if one asked her to. She doesn’t tend to come in very much because they just don’t have the time' (A12)

In this case the teacher felt sure the SLT would visit if the teacher needed advice. Others were less happy. One teacher, for example, reported that the SLT did not set work but acted as an adviser but stated -

'It’s only if you bring it up. She’s re-active rather than pro-active'. (A7)
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while another stated

'I don’t really know (what she does) she did not leave us that (information) (B17)

The SLT may leave materials for a programme for the teacher to carry out. Some saw this as helpful, particularly if the SLT knew the child well and had time to discuss with the teacher.

'I try to follow a language programme for her worked out with the communication therapist. She’s been very helpful because she has actually seen S over a long time and knows what her speech problems are’. (A4)

In a number of cases there was no recent contact with the SLT, particularly if the child was visiting a clinic. In some cases the referral was reported to have come via the GP, with no contact with school.

Teacher and therapist – successful collaboration?

The views of teachers in mainstream and in special language provision varied. The collaborations differed greatly both in terms of amount and style. To some extent this reasonably reflected the child’s needs. For example, one mainstream teacher reported that the SLT had written requesting that the teacher helped the child with certain sounds. This was considered appropriate as speech development, to that point, was seen as a lower priority than other aspects of development. In many cases, however, mainstream teachers were dissatisfied with the quantity and type of contact. Many teachers commented negatively on lack of contact and collaboration. There was also a Catch-22 situation revealed in this quotation:

Interviewer  The speech and language therapist didn’t think it would be worthwhile coming into school to do any work?

Teacher  “Well, that was the letter. If at any point in the future E receives one-to-one support I would be happy to liaise with staff in devising a specific programme of work for her, but I am unable to offer her a regular one-to-one spot myself’ (A1)

However, many mainstream teachers commented upon the lack of any programme or specific advice from the SLT -

‘It has been difficult to get people to come in let alone get them on the end of a phone (B17)

‘We have actually found it very difficult to get SLT support for these children’ (B27)

‘I was hoping that what would be suggested would be exercises and perhaps a little scheme of work that I could work through with the children but that’s never actually been forthcoming’ (A24)
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‘We do get programmes sent in either via parents or the SLTs themselves ...liaison is very poor’ (B18)

‘I don’t think it’s anyone’s fault. I think it’s lack of coordination between the people’ (B20)

Overall, there was a strong sense of children’s needs not being matched by input from SLTs. This was not simply a time issue, as the children may have been receiving other kinds of support in class. Rather, teachers were reporting that they lacked the expertise, which they saw as the role of the SLT. Some viewed a programme devised by, or in collaboration with an SLT as a way of accessing this expertise, but others considered that this was still inadequate. In one case, the SLT visited weekly but the teacher considered they could no longer give the necessary support as ‘we’re not experts’ (A8).

The SLT was seen as the key external expert to support the children with SSLD, but the general view of the teachers was that this provision was inadequate. Teachers were generally sympathetic to what they saw as a resources issue, with SLTs unable to provide the service they both wanted. What teachers wanted in many cases was advice and programmes provided by experts that they could implement. However, this was insufficient for many children, or some teachers, where the resulting delivery of support was still considered inadequate because of limited teacher expertise. Hence, while some teachers were prepared to do the best they could, optimising the resources available, others argued that these were simply insufficient either because of the time or level of expertise required. One teacher expressed concern in a forceful manner. Having been asked by the SLT to spend 10 minutes a day with the child, the teacher made this comment -

‘She (the SLT) realises it’s impossible. All she does is say ‘this is what he needs to work on’ and that’s it. The educational psychologist seemed to think that this was feasible so I just refused. Not because I don’t want to do it but because it’s a matter of principle. For me it’s a political thing. It has been explained to her that he’s been in a class of 35 for most of the year. She knows the amount of support we get’ (A6)

Teachers in special language provision reported, understandably, a very different level of support from SLTs, and overall presented a much more positive picture of the help available. In one special provision, with SLTs employed as well as teachers, a range of provision was reported, tailored to meet each child’s needs. For example, one child attended a word finding group plus individual therapy 2 or 3 times per week. Another attended a social skills group, while a third was in a concepts group, although both also
had individual therapy.

The preferred approach was collaborative planning of programmes, which took place, in class, supported by some individual work by withdrawal but

‘... Being fed back into the classroom so we have worked on the same strategies and the same spelling pattern and he is absolutely fine’. (A35)

The teachers did not consider all children were having their needs met, even in this setting. For example, one child on the autistic spectrum was considered to need more speech and language therapy than was available, even at this intensity. On the other hand, the general impression in special provision was of teachers who had positive collaborative working relationships with SLTs, who provided frequent, intensive and focused intervention, jointly planned with the teachers.

CONCLUSIONS

We interviewed the teachers of 69 children with SSLD to explore their understanding of the children’s difficulties, and to offer an opportunity for the teacher to describe the support the children were receiving and its adequacy. The picture presented is not encouraging. It must be remembered that the children were all on the SEN register. Eighty eight percent were at stage 3 and above, and 54% had statements. The teachers’ comments in conjunction with the standardised assessments confirmed that the children continued to have significant difficulties. A small number were now considered to have improved greatly, but generally even these were seen as still requiring special attention.

From a methodological perspective our data emphasize the importance of combining teachers’ perspectives with an objective assessment of individual children’s needs to provide estimates of the nature and extent of the children’s difficulties. For children with SSLD, wider based survey approaches (Dockrell & Lindsay, 2000) have produced higher estimates of associated difficulties. General comments about either the nature or implication of experiencing a special educational need may be misleading, thus the match between needs and actual difficulties is central to evaluation and planning. Reports on individual children both provide the teachers’ perspectives on the needs they encounter on a day to day basis and provide the opportunity of referencing these difficulties with the use of standardised
assessments. This provides strong evidence-based data about the challenges facing teachers and children.

From a practical perspective the research demonstrates that the teachers in our study had received little if any training in identifying and providing for children with SSLD. Even those in special facilities had learned on the job, or by short courses. Not surprisingly, therefore, their understanding of the nature of the children’s specific problems was limited, and inconsistent. The teachers recognised their own limitations and generally thought they lacked the skills to meet the needs of these children. Nonetheless their own views of the general difficulties the children experienced concurred with the children’s test results on standardised measures. Yet there were cases where attributions about the causes of the difficulties were disconcerting e.g. when the child’s problems were attributed to ‘bad speech habits’ or ‘laziness’. The majority of teachers were not equipped to judge how much of the child’s problem is amenable to change by the child and how much requires a carefully structured approach by the teacher.

The children had primary language difficulties which varied and were associated with other primary, or associated problems. As a consequence, intervention needed to be addressed to several issues: the language difficulties, curriculum area problems, especially literacy, and appropriate functioning within the school (normally a mainstream setting). Children’s strengths were often recognised, and some teachers noted compensation where a child’s strengths in one domain might lessen the impact of their communication difficulties. However, teachers were frequently concerned at their inability to provide suitable help. These teachers are right to be concerned, and at times to express their frustrations forcibly. The amount of expert language support was limited. Most of the children were ‘coping’, but many were viewed by their teachers as needing a level of help that was greater than they could give. Importantly these limitations were not solely attributed to resources and staffing.

Speech and Language Therapists were seen as key external professionals but the support they provided, or could provide, was limited. Time constraints, and the practical problems of infrequent visits were common, but there was also a question of expertise. Teachers with little if any direct support felt very exposed, but even those who received advice and programmes often felt inadequate because of their lack
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of expertise in implementation. Those teachers in special language facilities reported the situation more positively. Not only were they more skilled (even if having learned on the job) they also reported very positive collaborative work with SLTs. Also, although none mentioned this specifically, the very small class sizes and availability of SLTs on site enabled a variety of types of intervention to be delivered, addressing different language needs in different children, but also educational needs, e.g. in literacy.

We began this paper by highlighting the knowledge base that currently forms our understanding of developmental patterns. We argued that a teacher needs to have access to this kind of information to support appropriate educational provision. In particular we highlighted the need to understand the nature of a particular learning difficulty, the opportunity to collaborate with other professionals and the ability to access appropriate resources. As we have seen some teachers possess information about SSLD but this is not true for the majority of teachers. In contrast there was much greater awareness about the broader problems the individual children experienced, their relative strengths and the ways in which individual children changed overtime. However, much of this knowledge was acquired in an ad hoc fashion and not guided by the current understandings of the difficulties that children with language problems can experience. This means that teachers are in the difficult position of reacting to problems rather than planning to meet or prevent difficulties. For example teachers rarely highlighted the possible developmental links between language and behaviour or language and literacy. While this is not surprising given their limited access to additional training and support it does mean that the significant research investment in understanding children’s problems is not being translated into practice in mainstream settings. One potential opportunity for support and information was the speech and language therapists. However, the teachers in mainstream provision did not feel that the therapists had the necessary time to support either the children or themselves. However, while acquiring information and skills from individual professionals is an important element of an educational package it does not replace systematic, informed and regular training and information. In sum teachers are not receiving adequate support and, in general, are not provided with adequate information to meet the needs of children with SSLD.

If inclusive education is to be developed as a functionally appropriate system, the needs of children such
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as those in our sample must be addressed. In doing this, the needs of the teachers whose views we have reported here must also be taken into account. This is not simply a request for more resources in the sense of time, important though this is. Rather, the implications we draw are that we need:

**Appropriate Training**

Our findings imply that better training for teachers both preservice and inservice is important. This training should address language difficulties in general, and the various types of language problems presented by children. Our results concur with current more general conclusions from North America highlighting the need for training at all levels, particularly in the area of initial teacher training so that teachers enter schools with the skills required to teach all children (Yasutake & Lerner, 1996; Pearman, Huang & Mellholm, 1997). Perception of adequacy of ongoing training is a significant predictor of teacher competency scores, and that factor combined with satisfaction with support services were significant predictors of pre-school teachers attitudes towards inclusion (Gemmell-Crosby & Redditi Hanzlik, 1994).

**Appropriate collaboration**

Many of our teachers in mainstream felt bereft of support and information about the children’s needs. Teachers of children with learning difficulties have reported similar problems (Richmond & Smith, 1990). Administrative support and collaboration are significant predictors of teachers’ attitudes towards inclusion (Villa et al, 1996). Meeting the needs of children with language problems not only spans professional groups but also in Britain spans funding systems and models of service provision (health and education). The teachers require more specialist support from both SLTs and specialist language teachers. Impasses of communication and support are not the fault of individual professionals; rather this is a system failure. A review of the delivery of services by SLTs to optimise collaborative work between themselves, teachers and other professionals, e.g. educational psychologists is required (Law, Lindsay, Peacey et al, 2000).

**Longitudinal view of service provision**

Seventy-eight per cent of our teachers raised concerns about the children’s future progress and meeting their needs. A consideration of the total needs of children is required, and one which takes a view over
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time. Hence, the optimal provision for a child at one time may be skewed towards intensive support to
develop language competence, with integrated planning to develop spoken and written language skills in
parallel. Later, the focus may change to, say, social integration or literacy.

Current understandings of developmental and educational psychology offer clear guidelines about the
necessary infrastructure to support appropriate educational interventions. The teachers have provided
evidence that they show an awareness of the ways in which the individual children’s difficulties can impact
on classroom performance, and the differing profiles with which the children present were richly
described. Yet by their own admission they were less clear of the link between language skills and learning
and the ways in which these skills could be developed and there was a lack of accountability for meeting
the children’s needs. The development of an inclusive system, in our view, requires more than a simplistic
notion of all children being educated within their local mainstream school. This paper has exemplified the
difficulties faced by teachers, particularly those in mainstream schools, in implementing an under-
resourced, under-skilled, piece-meal and under-integrated system.
Children with specific speech and language difficulties – the teachers’ perspective

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We are grateful for the constructive comments of two anonymous reviewers.

1 Codes are identified by use of a capital letter to indicate LEA A or B and a number to indicate an individual.
2 T-scores could not be computed for this age range.
3 Where children failed to score on a test their data was not included in the analyses. This is likely to reduce levels of significance in a number of cases particularly on the reading measures.
References


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LEYSER, Y., KAPPERMAN, G. & KELLER, R. (1994) Teacher attitudes towards mainstreaming the disabled:
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Table 1. Assessments used to investigate the children’s language skills and attainments

<table>
<thead>
<tr>
<th>DIMENSION</th>
<th>TEST</th>
<th>AIMED TO ASSESS</th>
</tr>
</thead>
<tbody>
<tr>
<td>Language Skills</td>
<td>Test of Reception of Grammar (Bishop, 1989)</td>
<td>Understanding grammatical constructions</td>
</tr>
<tr>
<td></td>
<td>British Picture Vocabulary Scale (BPVS) (Dunn et al, 1997)</td>
<td>Level of understanding of vocabulary items</td>
</tr>
<tr>
<td></td>
<td>Naming Vocabulary (BAS II) (Elliot, Smith &amp; McCulloch, 1997)</td>
<td>Level of productive vocabulary</td>
</tr>
<tr>
<td></td>
<td>The Bus Story length and information (Renfrew, 1977)</td>
<td>Narrative/text production in terms of length and sophistication</td>
</tr>
<tr>
<td></td>
<td>Phonological Assessment Battery (PhAB) (Fredrickson, Frith and Reason, 1997)</td>
<td>Range of phonological skills</td>
</tr>
<tr>
<td>Non-Verbal skills</td>
<td>Matrices (BAS II) (Elliot, Smith &amp; McCulloch, 1997)</td>
<td>Non-verbal ability</td>
</tr>
<tr>
<td>Attainments</td>
<td>Early number skills (BAS II) (Elliot, Smith &amp; McCulloch, 1997)</td>
<td>School-based attainments related to numeracy</td>
</tr>
<tr>
<td></td>
<td>Spelling (BAS II) (Elliot, Smith &amp; McCulloch, 1997)</td>
<td>School-based attainments related to literacy</td>
</tr>
<tr>
<td></td>
<td>Macmillan Individual Reading Analysis (MIRA) - Accuracy and comprehension (Vincent &amp; de la Mare, 1990)</td>
<td></td>
</tr>
<tr>
<td>Social and Behavioural Development</td>
<td>The Strengths and Difficulties Questionnaire (SDQ) (Goodman, 1997)</td>
<td>Behavioural difficulties &amp; prosocial skills</td>
</tr>
<tr>
<td></td>
<td>The Pictorial Scale of Perceived Competence and Social Acceptance for Young Children (PSPCSA) (Harter &amp; Pike, 1984)</td>
<td>Scale designed to assess cognitive competence, physical competence, peer acceptance and maternal acceptance.</td>
</tr>
<tr>
<td></td>
<td>The Junior Rating Scale (JRS) (Abraham &amp; Lindsay, 1990)</td>
<td>Teachers’ rating of behaviour, motor skills and level of attainments</td>
</tr>
</tbody>
</table>

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Table 2. **Gaps in Knowledge and Experience**

<table>
<thead>
<tr>
<th>Gap</th>
<th>Examples of category</th>
</tr>
</thead>
<tbody>
<tr>
<td>Nature of the problem</td>
<td>‘I could not pick out exactly what it was, that was why I needed help from outside’ (B2)</td>
</tr>
<tr>
<td></td>
<td>‘I’m confused about what her real need is’ (B32)</td>
</tr>
<tr>
<td></td>
<td>‘He’s a conundrum to me, but that type of child is difficult to understand by the very nature of being that sort of child’ (A42)</td>
</tr>
<tr>
<td></td>
<td>‘I’ve been ignorant to his condition too. I’m no expert in that area and I’ve had no proper input in that respect’ (A23)</td>
</tr>
<tr>
<td></td>
<td>‘I feel I flounder with speech because it was something that we were never taught about at college’ (B31)</td>
</tr>
<tr>
<td>Intervention</td>
<td>‘I don’t know how we are going to do it really. It is an area [child’s language level] that you assume they just know’ (B31)</td>
</tr>
<tr>
<td></td>
<td>‘I was assuming because one of the children actually has a statement, talking about his specific need. I was assuming in my innocence that there would at least be a programme of work that I could work through because I actually feel as though I don’t know how to help them’ (A24)</td>
</tr>
<tr>
<td>Responsibility for</td>
<td>‘I just don’t know {who is responsible}’ (B20)</td>
</tr>
<tr>
<td>provision</td>
<td>‘He must have a statement because he’s been to see the unit and he’s definitely going in September but they don’t send us anything. The parents haven’t brought it in’ (A23)</td>
</tr>
<tr>
<td></td>
<td>‘We could refer him again [to SLT] but they’ll discharge him...I can imagine what will happen when he gets older he’ll be lost’ (B6)</td>
</tr>
</tbody>
</table>
Table 3. Results of five language measures for the whole sample

<table>
<thead>
<tr>
<th>Test</th>
<th>Mean centile (range)</th>
<th>Below 16th centile or age equivalent 6;1</th>
<th>Mean Age Equivalent</th>
<th>Mean Gap in years</th>
</tr>
</thead>
<tbody>
<tr>
<td>TROG</td>
<td>15 (.01-63)</td>
<td>63%</td>
<td>5;11</td>
<td>-2;4</td>
</tr>
<tr>
<td>BPVS</td>
<td>16.7 (1-77)</td>
<td>71%</td>
<td>6;1</td>
<td>-2;2</td>
</tr>
<tr>
<td>Bus story sentence length</td>
<td>12.3 (4.8-33)</td>
<td>37%</td>
<td>7;0</td>
<td>-1;3.</td>
</tr>
<tr>
<td>Bus story information</td>
<td>23.2 (5-42)</td>
<td>80%</td>
<td>4;4</td>
<td>-3;11</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Phonological Assessment</th>
<th>Average centile (range)</th>
<th>Below 16th centile (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Alliteration</td>
<td>21.8 (1-50)</td>
<td>53</td>
</tr>
<tr>
<td>Rhyme</td>
<td>22.6 (1-77)</td>
<td>58</td>
</tr>
<tr>
<td>Fluency alliteration</td>
<td>27 (1-94)</td>
<td>47</td>
</tr>
<tr>
<td>Fluency rhyme</td>
<td>22.5 (1-98)</td>
<td>61</td>
</tr>
<tr>
<td>Fluency semantic</td>
<td>26 (1-94)</td>
<td>53</td>
</tr>
</tbody>
</table>
Table 4. **Associated Difficulties reported by the teachers**

<table>
<thead>
<tr>
<th>Problem</th>
<th>Numbers difficulties reported by teachers</th>
<th>Percentage of total sample (base 69)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Literacy</td>
<td>11</td>
<td>16%</td>
</tr>
<tr>
<td>Maths</td>
<td>10</td>
<td>15%</td>
</tr>
<tr>
<td>Concentration</td>
<td>7</td>
<td>10%</td>
</tr>
<tr>
<td>Learning</td>
<td>6</td>
<td>9%</td>
</tr>
<tr>
<td>Life experiences</td>
<td>6</td>
<td>9%</td>
</tr>
<tr>
<td>Motor difficulties</td>
<td>6</td>
<td>9%</td>
</tr>
<tr>
<td>Memory</td>
<td>5</td>
<td>7%</td>
</tr>
<tr>
<td>Social relationships</td>
<td>5</td>
<td>7%</td>
</tr>
<tr>
<td>Behaviour</td>
<td>3</td>
<td>4%</td>
</tr>
<tr>
<td>Hearing difficulties</td>
<td>2</td>
<td>3%</td>
</tr>
<tr>
<td>Physical</td>
<td>2</td>
<td>3%</td>
</tr>
<tr>
<td>Visual difficulties</td>
<td>2</td>
<td>3%</td>
</tr>
<tr>
<td>Other</td>
<td>9</td>
<td>13%</td>
</tr>
</tbody>
</table>
Table 5. **Difficulties reported by the teachers in meeting children’s needs**

<table>
<thead>
<tr>
<th>DIFFICULTY</th>
<th>% reported</th>
</tr>
</thead>
<tbody>
<tr>
<td>Support related</td>
<td>49</td>
</tr>
<tr>
<td>Professional</td>
<td>20</td>
</tr>
<tr>
<td>Financial</td>
<td>16</td>
</tr>
<tr>
<td>School based</td>
<td>16</td>
</tr>
<tr>
<td>Discussion and dissemination</td>
<td>13</td>
</tr>
<tr>
<td>Parent related</td>
<td>10</td>
</tr>
<tr>
<td>No appropriate placement</td>
<td>9</td>
</tr>
<tr>
<td>Identification</td>
<td>6</td>
</tr>
</tbody>
</table>
Appendix - General Coding frame for teacher interviews

<table>
<thead>
<tr>
<th>Category</th>
<th>Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>Primary Difficulties</td>
<td>language, behaviour, learning, literacy, maths, concentration, memory, physical, autistic spectrum, social relations, hearing, vision, motor problems, lack of motivation, other</td>
</tr>
<tr>
<td>Other problems</td>
<td>language, behaviour, learning, literacy, maths, concentration, memory, physical, autistic spectrum, social relations, hearing, vision, motor problems, lack of motivation, other</td>
</tr>
<tr>
<td>Strengths</td>
<td>language, behaviour, literacy, maths, attitude, imagination, science, memory, physical, other</td>
</tr>
<tr>
<td>Identification</td>
<td>Who first identified?</td>
</tr>
<tr>
<td>Support</td>
<td>Past, present and type of support</td>
</tr>
<tr>
<td>Change in children</td>
<td>Changes or improvements in child during last 6 months</td>
</tr>
<tr>
<td>Professional involvement</td>
<td>Type, nature and extent</td>
</tr>
<tr>
<td>Liaison/communication</td>
<td>Nature and extent</td>
</tr>
<tr>
<td>Reported knowledge gaps</td>
<td>about problem, resources, needs and other</td>
</tr>
<tr>
<td>Concerns</td>
<td>present/future education placement/learning/behaviour/attainments</td>
</tr>
<tr>
<td>Problems in meeting</td>
<td>Financial, professional related, identification, placement in special provision, support related, discussion and dissemination of information, parent related, school based, location based, child related, other, no problems</td>
</tr>
</tbody>
</table>
Figure 1. Distribution of T-scores for BAS matrices subtest

Numbers of children achieving T-score

- <29: below 2%
- 30-35: 2-7%
- 36-39: 8-14%
- 40-59: 16-82%
- >60: above 84%

T-scores with equivalent centile range