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**Using the DLD Diagnostics Toolbox to Guide Terminology Decisions for Childhood Language and Learning Disorders**

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International Committee: RADLD.org  
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Slides available:  
<http://bit.ly/lwmpubs> →  
Presentations  
(or use QR code)



ASHA  
November 2022

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**Overview**

1. What is DLD?
2. The DLD Diagnostics Toolbox
  - 6 volumes

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At its core...

**Developmental Language Disorder**  
is difficulty with **lexical and grammatical diversity, productivity, and flexibility, and/or the social use of language**

PERSISTENT      FUNCTIONAL IMPACT

Western  Watch this great video by a young person with DLD explaining DLD: [https://youtu.be/rw0R0d1\\_0](https://youtu.be/rw0R0d1_0)

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### Functional Impact of DLD in Children

- Emotional & self-management difficulties (Fujiki et al., 2002)
- Behavioural problems (Maggio et al., 2014)
- Peer difficulties; friendship quality (Durkin & Conti-Ramsden, 2007)
- Peer victimization / bullying (Redmond, 2011)
- Academic learning (Adolf & Hogan, 2018)

DLD in the Classroom      Self-advocacy & DLD

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### Implications Impacts & Outcomes

DLD has a continuous & diverse impact on life, but

- It's a disadvantage, not a disaster  
Conti-Ramsden et al., 2018, p. 252
- A history of DLD does not, of itself, predetermine outcomes  
Johnson et al., 2010, p. 60

Services are required that meet both the duration and the breadth of the needs of people with DLD...  
Durkin et al. 2017, p. 1643

...even in adulthood  
Dubois et al., 2020, p. 12

Western  See next 5 hidden slides for details

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## Outcomes for Young Adults

- Education
- Employment
- Independent living

Video: Life as an adult with DLD  
<https://www.youtube.com/watch?v=hg5evvPYc-EY>

→ Source: Systematic review by Dubois, St-Pierre, Desmarais, & Guay (2020), U. Laval 🙌

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## Education Outcomes

### No differences compared to peers

- Participation in post-secondary education

### Differences compared to peers

- More institutional support
- Higher risk of school drop out
- Greater academic struggles
- Learn less in lecture-based courses

Predictors: Literacy skills in adolescence (16-19 years)

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Dubois et al., 2020; Becker & McGregor, 2016

8

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## Employment Outcomes

### No differences compared to peers

- Employment rates
- Job satisfaction
- Levels of support on the job
- Job security

### Differences compared to peers

- More part-time jobs
- Difficulties in job search process
- Longer periods of unemployment
- Lower job levels
- Risk of lower income in long term

Predictors: Language skills at 5 years

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Dubois et al., 2020

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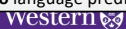
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### Independent Living Outcomes: Home

No differences compared to peers	Differences compared to peers
<ul style="list-style-type: none"> <li>• Marriage</li> <li>• Traffic infractions</li> <li>• Interactions with law enforcement</li> </ul>	<ul style="list-style-type: none"> <li>• Higher rates of early parenting</li> <li>• Challenges: financial literacy, independent living</li> <li>• More difficulty obtaining driver's license</li> </ul>

Predictors: Oral language skills at 17 years predicted having a driver's license  
No language predictors for financial literacy or parenting outcomes

 Dubois et al., 2020

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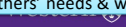
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### Independent Living Outcomes: Social & Community

No differences compared to peers	Differences compared to peers
<ul style="list-style-type: none"> <li>• Participation in social groups</li> <li>• Protective factor: Relative strengths in <b>*prosocial behaviours</b> related to better community integration &amp; less difficulty with friendships</li> </ul>	<ul style="list-style-type: none"> <li>• Challenges: friendships</li> <li>• Higher need for social support; less community integration</li> <li>• Lower self-efficacy, self-esteem</li> <li>• Higher levels of shyness</li> </ul>

Predictors: Oral language skills at 17 years predicted shyness, self-esteem

\*Prosocial behaviours: Behaviours that are positively responsive to others' needs & welfare (e.g., empathy, sharing, kindness, helpful)

 Dubois et al., 2020

11

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### Questions About Cause of DLD

- DLD is a language disorder with no known biomedical cause
  - (at this time)
- We don't understand what causes DLD; certainly, there is no single cause
- Multifactorial causal model
  - Lots of different factors make a small contribution to language outcomes
    - many different genes; many environmental factors
    - risk & protective factors
- We can't predict which genetic & environmental factors will result in DLD
- **We KNOW: Parents do not cause DLD**
  - not in terms of genes (there are just too many)
  - not in terms of what you do (your child hears lots of great language models)

 See more: <https://dld.westernu.ca/departmental-causes-of-dld/>

12

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### Label to Use

- Addressed in 'The CATALISE studies'
  - Bishop et al. (2016): Criteria used to identify language disorder
  - Bishop et al. (2017): Terminological issues

Lots of open access resources  
(see reference list)

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### Study 2: Terminology Highlights

#### Language disorder:

Persistent language problems with significant impact on everyday social & educational progress

- Not late talkers resolved by 5 years old
- Not uncomplicated phonology problems in preschoolers (Speech Sound Disorder)
- Not those with limited exposure to language of instruction (ELLs)
- Nonverbal ability is not a criterion

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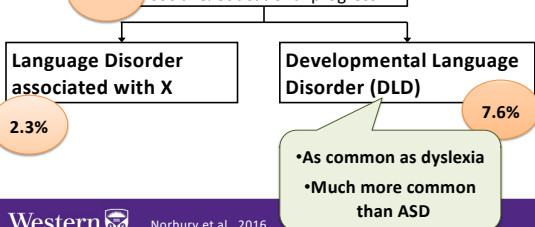
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### Study 2: Terminology Highlights

#### Language disorder:

Persistent language problems with significant impact on everyday social & educational progress



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**Developmental Language Disorder**  
describes a persistent language problem with a significant impact on everyday social interactions or educational progress.

...with no associated biomedical condition

Broad definition:  
Need additional information

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**DLD**

**Nature of language impairments**


- Phonology
- Syntax
- Semantics
- Word finding
- Pragmatics/language use
- Verbal learning & memory

**Risk factors**

- Family history
- Poverty
- Low level of parent education
- Neglect or abuse
- Prenatal/perinatal problems
- Male

**Co-occurring disorders**

- Attention
- Motor skills
- Literacy
- Speech
- Executive functions
- Adaptive behaviours
- Behaviour

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17

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**The DLD Toolbox**

- <https://www.uwo.ca/fhs/lwm/news/index.html>
- Instagram: @dld\_diagnostics
- Twitter: @larchiba6
- 6 volumes right now!

Volume 1  
[https://www.uwo.ca/fhs/lwm/news/2020/07\\_01\\_Report.html](https://www.uwo.ca/fhs/lwm/news/2020/07_01_Report.html)



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18

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Volume 1

**Diagnostic Decisions:**  
**Diagnostic Statements for Developmental Language Disorder**

Child referred to SLF/SALT due to concerns about (1) speech, language, or communication; (2) behavioural or psychiatric difficulties; (3) extreme departure from typical development before age 5; (4) persistent problems using or understanding language beyond age 5 (despite adequate opportunities)

SLF/SALT assessment results indicate persistent language disorder with a significant impact on everyday social interactions or educational progress that is not associated with a biomedical condition?

Provide DLD diagnosis

**Report statements suggestions**  
(\*\*These are not prescriptive statements! These are potential statements that might be used or adapted in reports)

The assessment results indicate that [child] has a Developmental Language Disorder (DLD).

Developmental Language Disorder (DLD) is a neurodevelopmental condition affecting approximately 7% of the population. The cause of DLD is generally unknown. DLD may impact behaviour, attention, academic achievement, and peer relationships. More information about DLD including links to helpful resources is available on the attached information sheet.

A Developmental Language Disorder presents differently across individuals. [Child's] language disorder is characterized by ... (describe relevant strengths & weaknesses)

A diagnosis of a condition in no way changes who [child] is as a person. It simply describes a cluster of observable behaviours and may help [child] and those around him/her better understand and support him/her as an individual.

A single assessment should not be considered in isolation. Further assessment may be required (optional: indicate time period) to monitor [child's] response to intervention or review current diagnosis.

Notes: 1 - see Bishop et al. (2016) CATALISE Study 1, PLOS ONE 11(12): e0160906, <https://doi.org/10.1371/journal.pone.0160906>; 2 - see Bishop et al. (2016) CATALISE Study 1, PLOS ONE 11(12): e0160906, <https://doi.org/10.1371/journal.pone.0160906>; 3 - see Bishop et al. (2016) CATALISE Study 1, PLOS ONE 11(12): e0160906, <https://doi.org/10.1371/journal.pone.0160906>; 4 - see Bishop et al. (2016) CATALISE Study 1, PLOS ONE 11(12): e0160906, <https://doi.org/10.1371/journal.pone.0160906> for providing content of the 'additional statements'

19

**Definition:**

Developmental Language Disorder describes a persistent language problem with a significant impact on everyday social interactions or educational progress.

...with no associated biomedical condition

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20

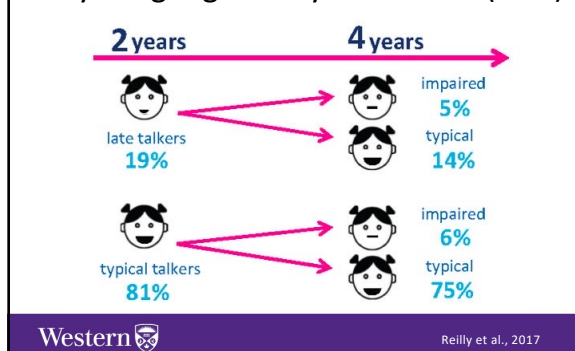
**Questions of Persistence**

- Particularly relevant for early language development
  - Late-talkers: limited expressive vocabulary at 18-24 months
  - Many catch up without any special help
  - Difficult to predict which late-talkers will have persistent language problems
    - Current tests lack sensitivity & specificity for predicting long-term problems (Law et al., 2000)
  - Recommendation: reassessment after 6 months

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21

### Early Language Study in Victoria (AUS)



22

### Prognosis in Early Years

- Under 3 years
  - Prediction is difficult; many late talkers catch up; some school age children with DLD were not late to talk
  - Higher risk: Fail to combine words at 24 mths; receptive deficits; lack of gestures; lack of imitation of body movements; positive family history
- 3-4 years
  - Prediction improves: In 4-yr-olds, greater number of areas of language functioning impaired, poor sentence repetition
  - Prognosis good: expressive phonology only

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Bishop et al., 2017

23

### Prognosis in Early Years

- 4-5 years
  - Prognostication more reliable
    - Bishop & Edmundson (1987): 90% accuracy in discrimination of good/poor outcomes
      - Severity of phonological impairment alone is not a good prognostic index
      - Good prognosis: phonology only; retells main events in story sequence (even if morphosyntactic & phonological errors); average nonverbal abilities
      - Poor prognosis: difficulties in form & content especially involving comprehension; unable to retell simplified sequence of story events (even with pictures)
- 5 years and over
  - Language problems in 5-yr-olds are likely to persist
    - Risk factor for literacy problems: Family history

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24



What label would you use if you were concerned but not confident of a Language Disorder profile?

Recommendation:

Avoid use of  
'delay'

Recommendation:

Use term 'language  
difficulty'

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25

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## Delay vs. Disorder

- Seems to equate to resolving vs. persistent difficulty
  - but, it is challenging to know who will resolve on the basis of late talking alone (Reilly et al., 2016)
- There is no possible criteria that could reliably distinguish delay vs. disorder
  - Discrepancy scores cannot distinguish delay vs. disorder (Bishop et al., 2017)
  - No evidence for flat vs. spiky profile as equating to these concepts
- Recommendation: Avoid use of term delay
  - Avoid inaccurate use
  - Avoid creating feeling that child will 'catch up' or 'it's not that serious'

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26

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## You can identify DLD in under 5s

- If prognosis warrants assumption of persistent language disorder
  - severity
  - multiple language components impaired
  - multiple risk factors
  - continued impairment at 6 month review
- Prognostic indicators can change with age (Bishop et al., 2016)

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27

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## DLD in Under 5s

## Volume 5 Diagnostic Scenario

- ✓ Language difficulties

? Likely to persist

- ✓ Significant impact on everyday social interactions

v No currently diagnosed biomedical conditions

[https://www.uwo.ca/fhs/lwm/news/2021/06\\_07\\_DLDUnder5.html](https://www.uwo.ca/fhs/lwm/news/2021/06_07_DLDUnder5.html)



28

[illegible]


29

## DLD Toolbox

### Scenario 1

## Assessment at 2 years, 9 months

## Re-assessment at 3 years, 4 months


Archibald (2021)  
[https://www.uwo.ca/fhs/wm/news/2021/06\\_07\\_DLUnder5.html](https://www.uwo.ca/fhs/wm/news/2021/06_07_DLUnder5.html)

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[illegible]

31

```
graph TD; A["Language disorder:  
Persistent language problems with  
significant impact on everyday  
social & educational progress"] --> B["Language Disorder  
associated with X"]; A --> C["Developmental Language  
Disorder (DLD)"]; B <--> C; D["Differential Diagnosis"]
```

**Language disorder:**  
Persistent language problems with  
significant impact on everyday  
social & educational progress

**Language Disorder**  
associated with X

**Developmental Language**  
**Disorder (DLD)**


**Differential Diagnosis**

32

# Differential Diagnosis

- Distinguishing a particular condition from other conditions that present similar clinical features
- This differential diagnosis is based on the presence of differentiating conditions

Language Disorder associated with <b>{biomedical condition}</b>	Developmental Language Disorder (DLD)
	Co-occurring with another condition

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33

### What makes a differentiating condition (for language disorders)?

- It is a diagnosed biomedical condition
- The biomedical condition has a complex pattern of impairments
- The observed language disorder occurs as part of this pattern
- The language disorder is a primary (direct) or secondary (associated) symptom of the diagnosed condition

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34

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### What makes a differentiating condition (for language disorders)?

- The associated language disorder might be qualitatively different from DLD (in one or more ways):
  - has a clear genetic etiology
  - has a different prognosis from DLD
  - requires distinctive intervention
  - some language limitations different from DLD

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### Language Disorder associated with...

- Differentiating conditions
  - Brain injury
  - Sensori-neural hearing loss
  - ASD
  - Intellectual disability
  - Genetic conditions with known impacts on language development (e.g., Down Syndrome)
  - Neurodegenerative diseases with known impacts on language development (e.g., Rett syndrome)
  - Acquired epileptic aphasia in childhood
  - Cerebral palsy

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36

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### DLD co-occurring with...

- Not every co-occurring condition is a differentiating condition!
  - If an existing (diagnosed) condition is...
    - not a differentiating condition
    - likely to impact language performance
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Developmental Language Disorder  
co-occurring with {existing condition}

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37

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### Conditions Co-occurring with DLD

- Previously diagnosed (i.e., existing conditions)
- Do not commonly include a language disorder in their presentation (i.e., not a differentiating condition)
- Are impairments in domains relevant to language performance (i.e., cognition, sensation, behaviour)
- Can affect pattern of language impairment and/or response to intervention
- Include attentional, motor, reading, spelling, speech, adaptive, behavioural, or emotional difficulties

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38

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### Conditions Co-occurring with DLD

- Examples
  - ADHD
  - Developmental Coordination Disorder
  - Auditory Processing Disorder
  - Terms describing below average cognition not in the intellectual disability range
    - e.g., borderline intellectual functioning

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39

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## Language Disorder Profile

<b>Language Disorder Associated with X</b> <ul style="list-style-type: none"> <li>• Intellectual Disability</li> <li>• Autism</li> </ul>	<b>Developmental Language Disorder</b> <ul style="list-style-type: none"> <li>• Specific Learning Disorder</li> <li>• Behaviour Disability</li> <li>• Speech Sound Disorder</li> <li>• Dyslexia</li> </ul>
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Volume 4  
[https://www.uwo.ca/hs/wpm/news/2021/01\\_04\\_DLDCoAss.html](https://www.uwo.ca/hs/wpm/news/2021/01_04_DLDCoAss.html)

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Diagnostic Decisions:  
DLD as a Co-occurring Condition vs. Language Disorder Associated with (X)

Volume 4

<p><b>Diagnostic Scenario</b></p> <p>Differential diagnosis is the distinguishing of a particular condition from other conditions that present similar clinical features. The differential diagnosis of "Developmental Language Disorder" (DLD) from "Language Disorder associated with (X)" is made based on the presence of differentiating conditions. This scenario focuses on existing conditions that might be considered differentiating vs. co-occurring.</p> <div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> <p>Child referred to SLU/SALT services (see DLD Diagnostics <a href="#">vol. 1</a>)</p> <p>SLU/SALT assessment results consistent with Language Disorder</p> <p>Child has been diagnosed with another existing condition relevant to language performance or development</p> </div> <div style="width: 45%;"> <p>Child has no other diagnosed condition relevant to language performance or development</p> <p>See DLD Diagnostics <a href="#">vol. 1 &amp; 2</a></p> </div> </div> <p>The pattern of impairments commonly associated with the existing condition does not include language disorder; however, the existing condition is likely to impact language performance</p> <p>The existing condition is a differentiating condition, that is, a biomedical condition in which a language disorder can occur as part of a complex pattern of impairments</p> <p><b>Diagnostic Decision</b></p> <p>Provide diagnosis of DLD co-occurring with existing condition</p> <p>Provide diagnosis of Language Disorder associated with (Biomedical condition)</p>	<p><b>Further Information on Co-existing Conditions</b></p> <p>Co-occurring conditions relevant to language performance include impairments in cognitive, sensorimotor, or behavioural domains</p> <p>Conditions co-occurring with DLD:</p> <ul style="list-style-type: none"> <li>• are not the clear or obvious cause of the language disorder</li> <li>• can affect pattern of impairment</li> <li>• can affect response to intervention</li> <li>• include attentional, motor, reading, spelling, speech, adaptive, behavioural, or emotional difficulties</li> </ul> <p>Nonexhaustive List of co-occurring conditions</p> <ul style="list-style-type: none"> <li>• Attention Deficit Hyperactivity Disorder (ADHD)</li> <li>• Developmental Coordination Disorder (DCD)</li> <li>• Auditory Processing Disorder (APD)</li> <li>• Developmental Dyslexia</li> <li>• Speech Sound Disorder</li> <li>• Specific Learning Disability</li> <li>• Terms describing below average cognitive ability not in the Intellectual Disability range (e.g., Borderline Intellectual Functioning, Mild Intellectual Disability)</li> </ul> <p>Notes 1 - Refer to <a href="#">Diagnostic Scenarios of DLD</a>. Also see <a href="#">Bishop et al. (2017) Conduct Study 2: CPM 16, URL: <a href="https://doi.org/10.1111/cpsp.12161">https://doi.org/10.1111/cpsp.12161</a></a></p> <p>2 - Bishop et al. (2016) <i>Assessing speech &amp; language development</i> (OUP), pp. 40-42, <a href="https://doi.org/10.1017/9781107309919.002">https://doi.org/10.1017/9781107309919.002</a></p>
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But what about?

## Suspected/uncertain biomedical condition

You have determined the presence of a language disorder. You suspect an associated biomedical condition, but there is no diagnosis (at present).

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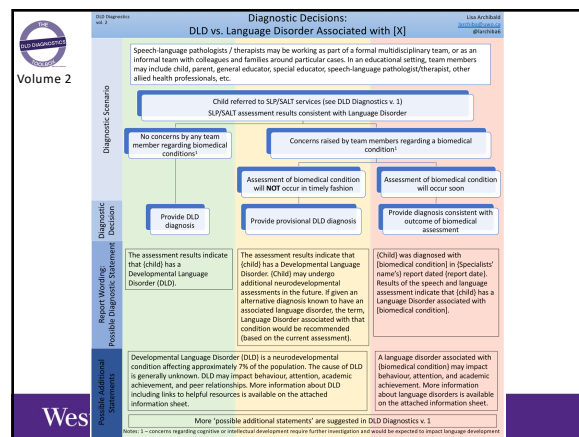
## Suspected/uncertain biomedical condition

- Options:
  - Use the overarching term, 'Language Disorder' until diagnosis is resolved
  - If timely, wait for resolution
  - Provisional clinical profile of DLD

Volume 2  
<https://www.uwo.ca/hsf/wpm/news/2020/index.html>

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43



44

## So many terms...


- Specific Learning Disorder
- Specific Learning Disability
- Developmental Language Disorder

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45

## DSM-5

<b>Language Disorder</b> <ul style="list-style-type: none"> <li>• Persistent difficulties in the acquisition and use of language across modalities (spoken, written, sign)</li> <li>• Difficulties not attributable to other causes (e.g., neurological impairment; intellectual disability)</li> <li>• Consistent with DLD</li> </ul>	<b>Specific Learning Disorder</b> <ul style="list-style-type: none"> <li>• Persistent difficulty learning and using academic skills (reading, writing, math)</li> <li>• Alternate terms: dyslexia; dyscalculia</li> <li>• Potentially comorbid with DLD; dual diagnosis given only if each disorder independently interferes with learning</li> </ul>
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## Specific Learning Disability

- A disorder in one or more of the basic psychological processes involved in **understanding or in using language, spoken or written**, that may manifest itself in the imperfect ability to listen, think, speak, read, write, spell, or to do mathematical calculations, including conditions such as perceptual disabilities, brain injury, minimal brain dysfunction, dyslexia, and **developmental aphasia**.

DLD!

- [IDEA, Section 300.8.c10]

- Educational identification that may be used to describe children with DLD: <https://dldandme.org/terminology/>; <https://dldandme.org/dld-in-schools-an-insiders-perspective/>

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47

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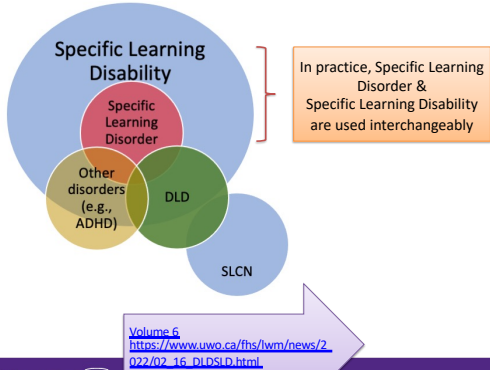
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**Diagnostic Decisions: DLD, Specific Learning Disorder (Learning Disability): What's the difference?**

**Developmental Language Disorder (DLD) and Specific Learning Disorder (SLD) are neurodevelopmental disorders.** Although their precise etiology is unknown, in both cases, the primacy of biological factors (i.e., combined effects of many genes) is assumed to interact with environmental factors. These disorders commonly co-occur. A dual diagnosis is warranted when clinical judgment & assessment findings indicate each condition restricts daily activities including learning. Ideally, children making slow educational progress should receive a comprehensive, interdisciplinary assessment of language, cognitive, social, emotional, and academic achievement.

**Developmental Language Disorder (DLD)**

Persistent language difficulties with a significant impact on everyday interactions or school learning that emerges in the course of development (CADASIL), but also consistent with the CD-11 category of the same name.

This definition is consistent with DSM-5 Language Disorder, and includes pragmatic language skills (see also, Social Pragmatic Communication Disorder).

**Specific Learning Disorder (SLD)**

Persistent difficulty learning and using academic skills (word reading, reading comprehension, spelling, written composition, math) identified no earlier than 6 months after targeted instruction begins (DSM-5).

The CD-11 category, Developmental Learning Disorder, is largely consistent except for the inclusion of a mismatch with expected general level of intellectual functioning.

**Key differences (1) Low & high (2) Oral & written**

**DLD:** An impairment to phonology only (i.e., no other components of language) would not be diagnosed as DLD (CADASIL), but could indicate a Speech Sound Disorder (speech production and articulation difficulty) or Dyslexia (word recognition difficulty). DLD pertains to language learning. The hallmark trait is a predisposition for language acquisition, which means that language learning happens largely without explicit instruction. Difficulties arise early on but may not raise concern for a variety of reasons (variability in early language development, assuming child will "catch up" difficulties seeming "not too bad"). Many individuals with DLD go undiagnosed or mis-diagnosed.

**SLD:** Language is fluency in language. DLD can be expected to impact both oral and written language (and related academic skills including math). In older individuals, difficulties may be more evident in written language tasks such as reading comprehension & written composition.

**Refer:** Minimally, a child with DLD should be assessed for dyslexia and reading comprehension. A lack of response to individualized instruction (with sufficient dosage) targeting educational skills would be a reason to refer for an assessment of learning.

**Diagnostic Decision:** In some educational jurisdictions & countries, educational support is provided based on the presence of a disability (or other educational identification label) rather than a disorder.

**SLD:** SLD is a learning disability (LD) rather than a disorder. Many definitions of learning disability (see below) stipulate MLD conditions that can interfere with learning & include DLD, specific Learning Disorder, ADHD, and others. Children with DLD or Specific Learning Disorder may be identified as having a Specific Learning Disability.

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49

**Could this still be DLD?**

- Scenario: Standardized assessment results do not clearly indicate DLD. Could it still be DLD?
- Standardized tests:
  - May not be sensitive to all impairments that affect day-to-day language functioning (Bishop et al., 2016)
  - May not differentiate some individuals with language difficulties

**Volume 3**  
[https://www.uwo.ca/hs/awm/files/blpr\\_tools/DLDDiagnostics\\_LowAvLangUBRE\\_v3.pdf](https://www.uwo.ca/hs/awm/files/blpr_tools/DLDDiagnostics_LowAvLangUBRE_v3.pdf)

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50

**Diagnostic Decisions: Considering DLD in Context of Low Average Language Test Scores**

Speech-language pathologists / therapists combine information from multiple sources including caregiver report, observation, standardized tests, language learning context, etc. Many factors influence decisions regarding what to do or not to do in an assessment. This scenario focuses on standardized language tests scores.

Child referred to SLPSALT services (see DLD Diagnostics v.1)

SLPSALT standardized language assessment is not clearly indicative of language disorder (scores in the borderline average to low average range)

**Could this still be DLD?**

**Additional evidence in favour of a DLD diagnosis**

- Additional standardized language test chosen based on reason for referral indicates language disorder
- Results of dynamic assessment indicate presence of language disorder
- Standardized & psychometrically sound parent or teacher checklist indicates language disorder
- Written language efforts indicate presence of a language disorder

**Considerations**

- Are the psychometric properties of your tests sufficient for identifying DLD?
- Is referred child comparable to test's normative sample?
- What language(s) does the child speak? What language are tests completed in?
- What are the results of previous assessments, interventions, or services in a response to intervention framework?
- Is poor performance under conditions of high load related to language demands?
- Is there evidence that language skills are substantially different from peers in some way?

**Additional evidence disconfirming a DLD diagnosis**

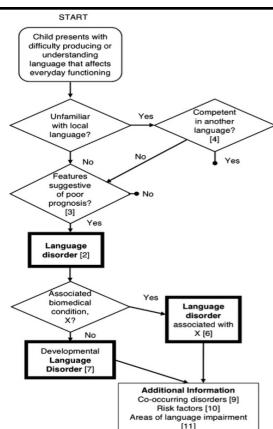
DLD often co-occurs with conditions such as ADHD & speech sound disorder, and can occur in children who do not speak the majority language. These factors, however, could – on their own – account for low average language test performance.

- Poor performance is FULLY accounted for by one of the following:
  - Other conditions such as ADHD or Speech Sound Disorder
  - Risk factors known to impact language development
  - Opportunities for instruction
  - Dialect differences
  - Second language differences
- There is no functional impact related to a language disorder

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## Study 2: Decision Pathway



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What's next?

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## Advocacy: Websites

- RADLD.org
  - Websites, blogs, videos, free papers, personal stories, promotional materials
  - Annual DLD awareness day
    - 2021 – October 15
- DLDandMe.org
  - Support & resources for parents, teachers, and those impacted by DLD

54

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**We're on it at Western!**

**Developmental Language Disorder: The Childhood Condition We Need to Start Talking About**

Authors: [Marika Robillard](#) and [Lisa Archibald](#)


Young Reviewers: [Dr. Sarah](#), [Dr. Emily](#) and [Dr. Alex](#)



**ABSTRACT**  
Using language is a skill that allows us to share our ideas and feelings, to learn, to connect, and to understand the world around us. Unfortunately, some are

**Frontiers in Young Minds**  
<https://kids.frontiersin.org/article/10.3389/frym.2019.00094>

**Communiqué**  
S-LP Audiology Communication Health Assistants Students



**Developmental Language Disorder: Why You Should Add DLD to Your Vocabulary**

Also 2 blogs by Marika Robillard on DLD in other languages (April 25, 2019; Oct. 4, 2019)

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55

**We're on it at Western!**

- My students' projects:
  - <https://www.uwo.ca/fhs/lwm/teaching/dld2.html>

Supporting DLD in the classroom  
<https://youtu.be/PKegRIHFqH4>

Follow me on twitter at @larchiba6 !!

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56

**Thank you!**

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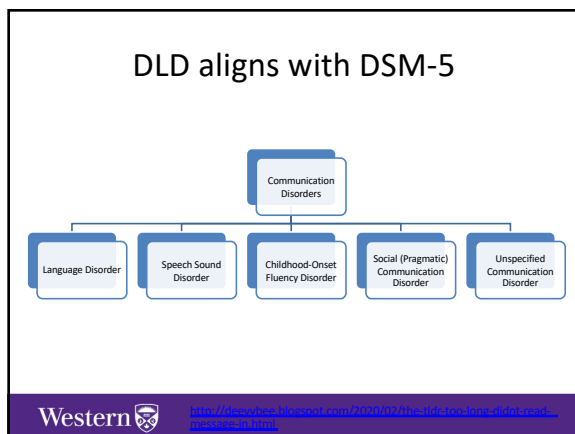
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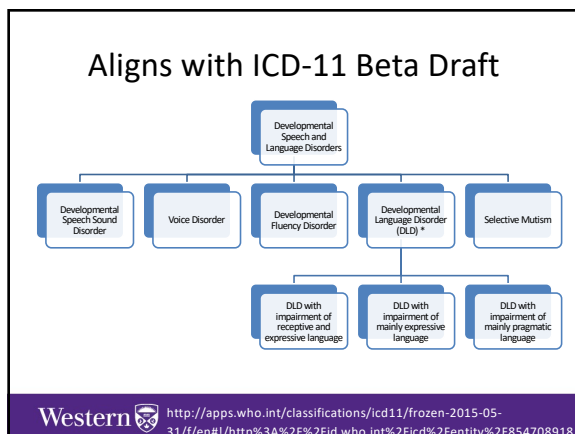
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