Speech, Language and Communication

Qualitative Research Debrief

June 2025

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Background

Engagement with parents and carers to help inform the development of Education Scotland's National Speech, Language and Communication Action Plan, utilising qualitative research techniques.

Explore parents' knowledge about and attitudes towards the development of their child's speech, language and communication skills, focusing on the following four areas:

- Parents' understanding of their role in developing their child's speech, language and communication (SLC) skills.
- Parents' views on whether the early years workforce understand families' circumstances that may impact SLC development.
- Understanding when, how and what SLC development information has been shared with parents and identifying any gaps.
- Parents' views on how they receive information and support on SLC development.

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Sample Frame

- 34 respondents
- All respondents caring for at least one child aged between 0 and 3 years
- Recruited through local authority nurseries, Five to Thrive and PEEP groups in NHS boards where speech, language and communication concerns are higher than the national average.
- Research was conducted in person

Location	Type	Number of respondents
Kilmarnock	3 x focus groups	18
Arbroath	1 x focus group 1 x paired depth interview	9
Glasgow	1 x focus group	7

SIMD quintile	Number of respondents
1 (most deprived)	14
2	7
3	4
4	0
5 (least deprived)	0
Unknown	9
Total number of respondents	34

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Five key themes

1. Health visitors are key
2. Stigma can be paralysing
3. Communication is seen as a ‘natural thing’
4. Varying degrees of self-efficacy and agency
5. Resources need to stand out in a crowded communications space.

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Parents understanding of their role in SLC development and how much of a priority it is to them

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Parents understood the importance of speech, language and communication, and that they had an important role to play in their child's development.

- Many parents felt strongly that it was an important area for their child's development.
- They understood that they are responsible for their child's speech, language and communication development.
- Those for whom English is a second language mentioned that their child benefited from interactions with other children, in particular their siblings or children at nursery.
- There were some parents who had been actively and consciously supporting their child's SLC development in the first year - motivated by the knowledge of how fast a baby's brain grows in those months.
- Others were aware of communications signs before the first word, such as mimicking, babbling and pointing.

"You always try and get down to their level. They will mimic back.. you know when they're trying to formulate their speech..."

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Despite acknowledging its importance and their role, SLC development was often viewed as something that would happen naturally and without much intervention from parents.

- Some parents had not thought about speech, language and communication development before.
- Few parents were able to immediately share examples of what they do with their child to specifically develop their speech, language and communication skills.
- Across all groups parents shared the view that speech, language and communication skills come naturally to children.
- Parents may not consider SLC until it becomes a development milestone.
- Up until this point difficult to assess and other development areas can be prioritised. Also difficult to know if what they are doing is making a difference as no immediate results.
- For some communicating with their child could be frustrating and challenging.

"My child is fine – they pick up all the communication stuff at nursery from the other kids."

"If you have a child that is a very receptive to your natural instincts and communications, that everyday communications that happen through your daily routine but you don't process or think about it until you've got to learn a wee bit more about it."

"It can be quite frustrating sometimes to pick up on the signals, especially at that young age, about what they're trying to signal."

Parent's views on whether the early years workforce understand the families' circumstances and day to day experiences that may impact SLC development

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Health visitors and nursery professionals were praised for taking the time to really understand the family they were supporting.

- For many parents, positive and trusting relationships with health visitors and nursery staff were built through ongoing face-to-face relationships with individual professionals over time.
- Some parents with children in nursery described the nursery professionals as an extended part of their family, who understood their children almost as well as the parents.
- Working parents acknowledged the importance of the nursery professionals and their reliance on them to develop their children's speech, language and communication skills.
- Health visitors were praised for:

  - Being available outside of the expected timeslots/required visits by extending their visits or sharing their phone number.

  - Recognising when extra support was needed, especially if it wasn't directly asked for.

"My health visitor can walk in and sit in the kitchen, be like, are you OK? Because she knows I'm not OK. She's built that relationship, so they should be seeing you. You almost don't have to tell her, she knows you well enough to see."

"She understands you and she's got good information. Sometimes she's in my house for two hours, so she must be late to the other people."

"Was about 12:00 when my health visitor had an appointment. And I never had a shower or even a chance to wash myself because she was up all night. (I said) would you mind taking her for 5-10 minutes so I can have my shower or even a wash. And, you know, my health visitor stayed."

However, experiences were inconsistent with many parents not able to build that relationship and feeling that health visitors had not earnt their trust.

- Many parents experienced disappointment at not having a consistent health visitor.
- Some described their relationship as a tick box exercise that met minimal expectations.
- For some parents trust had to be earnt – particularly if there was a sensitivity to feeling judged by others.
- Some had experienced professionals prioritising other areas of development over SLC

"I think it's so wrong that not all health visitors are on the same level. I think it should be. They need to be."

"Come into my house and you ought to be someone I would actually be OK with or like someone in the nursery."

"They wanted the walking and things like that first before the communications, it wasn't like number one. And that came from the health visitor. Basically, they wanted to make sure that he was walking first."

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Understanding when, how and what SLC development information has been shared with parents and identifying any gaps.

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Related interventions recalled by parents.

Child's age	Initiative	SLC Professional
Prior to birth	Ready, Steady, Baby / Baby Box	Midwife
At birth	Leaflets	Hospital
At registration of birth	Leaflets	Local register office
3-5 weeks	Bookbug bag	Health Visitor
13-15 months	Bookbug bag	Health Visitor
3 years	Bookbug bag	Nursery

Bookbug

NHS nhs.uk

Tiny Happy People Activities

Parent Club

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Sparks	Incredible Years
NEST	PEEP Programme
Five to Thrive	Speech Therapists

Context around interventions

- Provision relies heavily on successful interactions with early years professionals however support can be inconsistent.
- Parents found it difficult to identify SLC messaging due to timing in the first six months
- Parents described discarding or overlooking leaflets or other literature (books) if they felt overwhelmed.
- Respondents who had literacy challenges were also likely to ignore leaflets or information provided in large amounts of text
- Parents' examples of current SLC activity in their family were predominantly passive observation and listening, such as the child watching family members talk to each other, listening to a story or watching a video.

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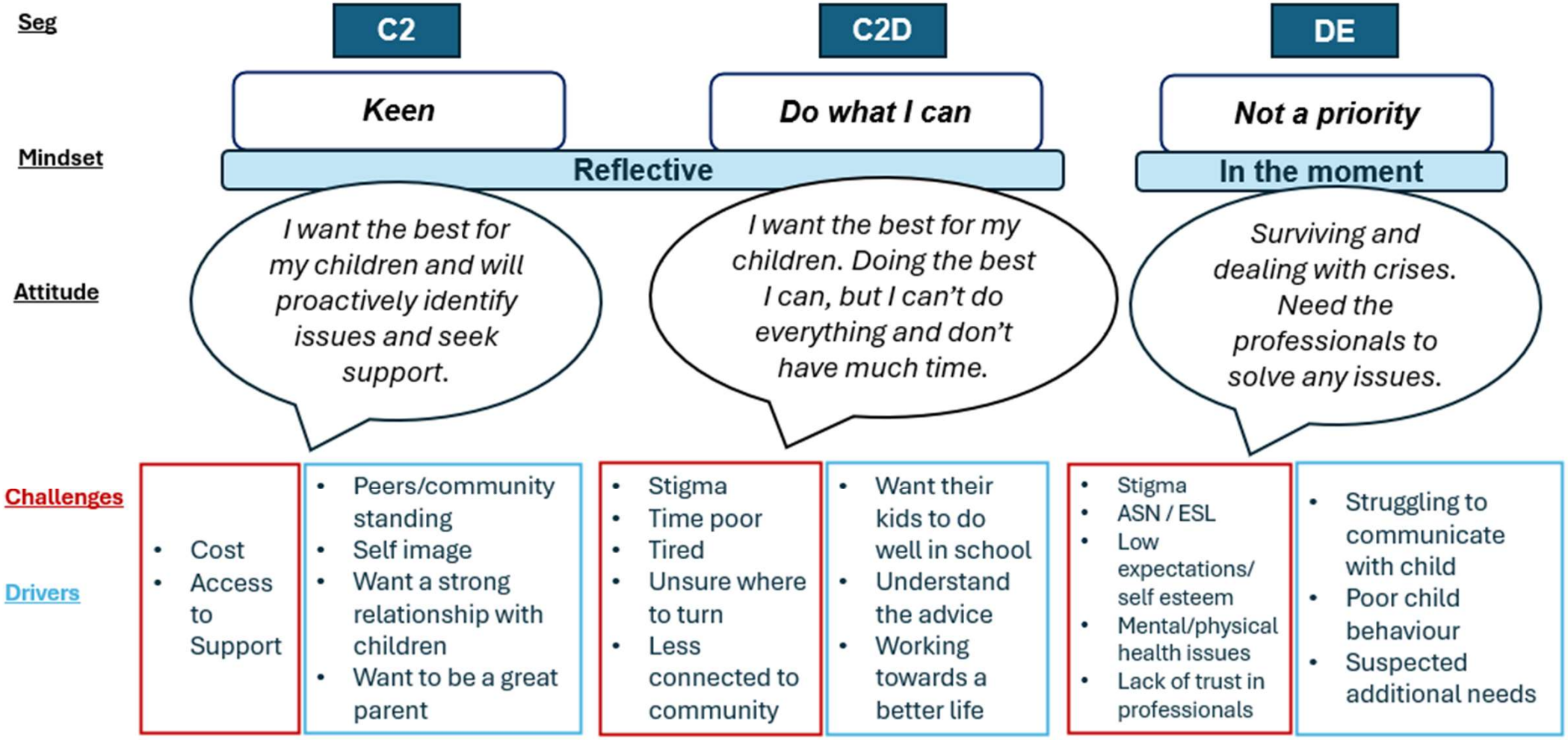
Successful engagement with information and resources relies on the self-efficacy and agency of parents.



Parents' views on how they receive information and support on SLC development

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Parents had a clear preference for face-to-face delivery, however time poor working parents favoured digital communications that were easily accessed.

"Baby massage, things like that, where you go and you attend. There's a social aspect not only for you, but for your baby as well, I think. Also what it does is it prompts the parent to be out so that then improves their mood that they're engaging their socialising."

"Delivered for each community, like via the nursery."

"I'd be looking for resource that can be used within the community when and if needed. And that is like a drop in clinic that you talk about support and guidance"

"For me it would be an e-mail sent to my phone like that is how I best receive information in an e-mail, because that's what I'm on every day. If that's not in front of me, I'm not logging on. You get a lot of text messages and things, GP surgeries. You know. How hard would it be? (Working mum)"

Parents mentioned using online videos to support SLC development, but some noted that this did not encourage reciprocal interactions and could have American content.

"I know a lot of like the TV things you get on YouTube. It's all free, but you lose the reciprocal conversation."

"Like my husband, is not talking in English. So ... my first one [son] is [going] to the nursery and he's seeing the ...YouTube Kids and he [is learning] many sentences."

"So we use things like that with them, and then she was getting American accent, aye. But there's nothing British like."

Stigma was the biggest barrier to parents seeking out or accessing speech, language or communication support across all groups and interviews.

- Some parents expressed anger or anxiety at the thought of early years or SLC professionals making negative judgements about their parenting skills or viewing the development of their child as inadequate.
- Some had concerns that being invited to a course or support group reflected badly on their ability to parent their child.
- There was evidence this could be overcome if support was suggested or provided by a trusted professional who understood their family's circumstances.

"You know if I go and say I'm needing help then you'll maybe see me as weak."

"People can be quite judgy because he wasn't talking. So I don't feel that there was any help to not make me not feel that way."

"A lot of people put too much pressure on where the kids should be. My mom does. My mom compares my niece."

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Other barriers can be divided into personal circumstances and access to information and support

Personal circumstances	Access to information and support
Finding the time Particularly challenging for working parents, those with three or more children, or those caring for elderly relatives/a family member with a health condition.	**Literacy levels** Neurodiversity or English being a second language, made accessing books, information online and leaflets challenging.
Mental capacity The sample referred to relationship breakdowns, job loss, addiction, lack of sleep/tiredness.	**Too much information available** Difficult to navigate and know what to trust, especially online.
Reliance on technology Increasing reliance by parents on technology/devices for entertainment/activities for children and themselves.	**Selective access (Glasgow)** In Glasgow, access to additional support services, such as Five To Thrive, was seen as selective and not open to all. Commercial parent and baby groups were replacing low-cost community initiatives.

Verbatims

"I was literally plumbing pipes backward. ...I just don't get any sleep. I'd come back on from work and I'll sit outside. I need to sleep for now or something so that I can just have a bit of a recharge and I can spend time with her."

"I'm dyslexic, that's why I like songs. If need to go for information, I'll go for something that catches my attention or I might type in in Google and then go to an image. And then from the image I'll go maybe watch a video, because then somebody's talking to me and I don't need to sit and try and read it."

"I think there is a lot of excessive information because there's so much more because of the internet, social platforms and stuff."

"I'm calling them and they not listen because they are playing in her games and sometimes in YouTube."

"These other franchises have kicked in and they're like, oh, bring your baby here for eight weeks. It's going to be blah blah... that's kind of taken over from what used to be community. Initially you were going to take a pound a week and you would put in for your term... (Glasgow participant)

"I don't think parents, any parents, really get to spend as much time as they like with their third child."

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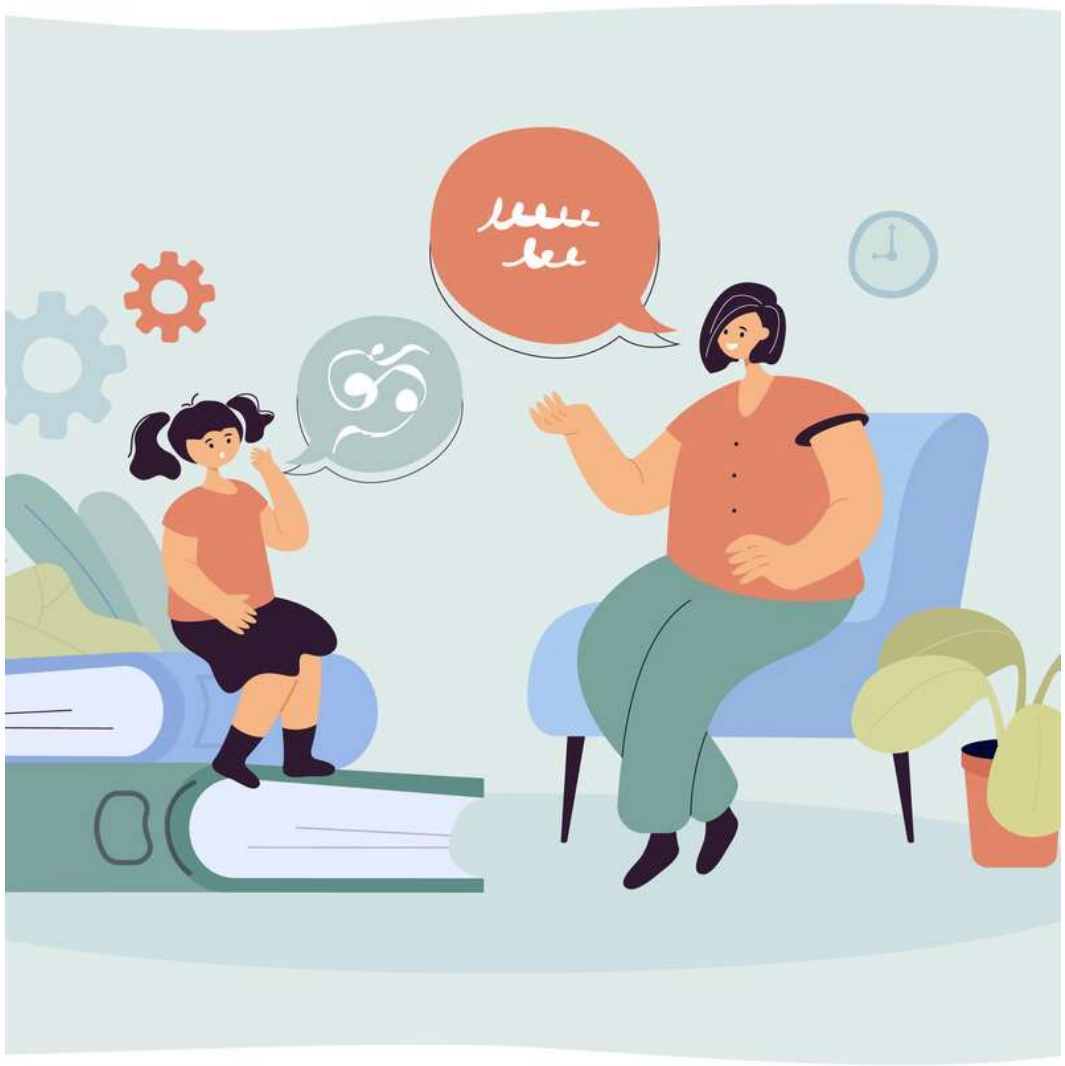

Recommendations

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Recommendations for creating SLC development resources for parents and early years professionals.

- Dedicated speech, language and communication development resources should be clearly labelled.
- Emphasise the importance of interaction with the child.
- Give parents reasons to care about SLC in the first 12 months.
- A variety of resources should be created to cater for all types of learner.
- Find space for SLC communications
- Ensure there are multiple opportunities to hear consistent messages.

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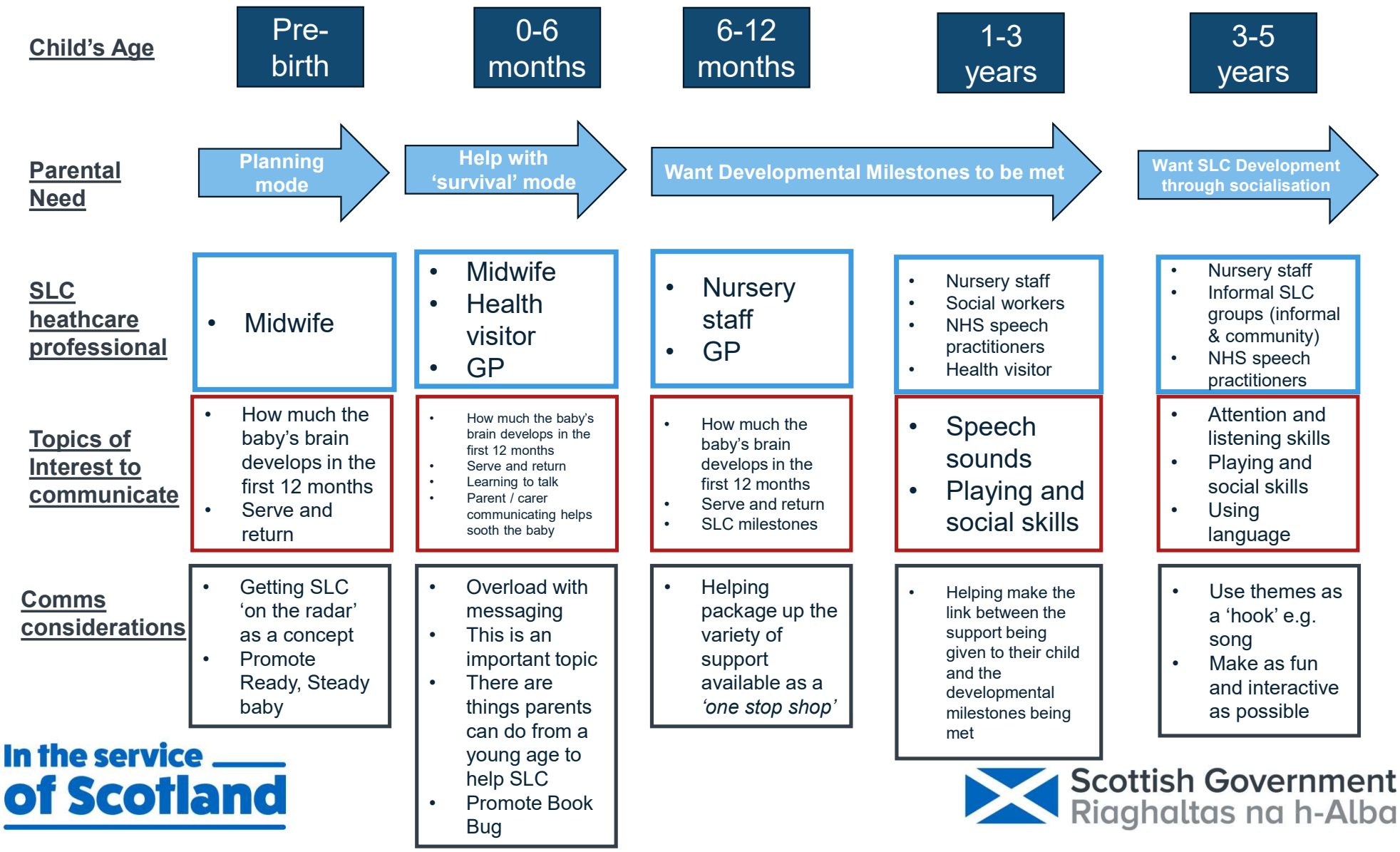

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