



LET'S TALK

...FOR PEOPLE WITH SPECIAL COMMUNICATION NEEDS

Child Language Disorders

Children with language disorders have difficulty expressing their thoughts when talking or writing. They also may have problems understanding what is spoken or written. Most child language disorders are developmental—that is, they show up as the child grows and develops and are not the result of known injury or other occurrence during childhood.

Child language disorders are different from acquired language disorders. Acquired disorders appear specifically as the result of a brain injury, stroke or other neurological disturbance, and may be treated differently from disorders that are developmental in nature.

Child language disorders may range from mild to severe, and may occur from infancy through adolescence. Early intervention can help children communicate effectively and can alleviate some of the frustration parents and children feel. Early language intervention also can help reduce or prevent later problems with reading, writing, school work, and social behavior.

Causes

Some research suggests that child language disorders result from altered development of the brain before birth, affecting the way the brain functions. Sometimes the problem can be associated with other conditions such as hearing loss, cognitive impairment, or autism. Often the cause is unknown.

Signs and Symptoms

Children with language disorders who have difficulty understand-

ing spoken language are described as having a receptive language disorder. For example, children with receptive language disorders may be unable to discriminate differences between speech sounds and among sequences of sounds in words (e.g., can't tell the difference between peas and bees). They may not understand the meaning of word endings, such as adding "s" to mean "more than one" (e.g. books, shoes). They may have difficulty understanding directions or questions because they do not understand how word order affects sentences, or because prepositions (e.g. "behind," "in front of") and adjectives (e.g. long, longer) are not meaningful to them, or because the sentence is too long. They may have difficulty following a conversation, especially when the speaker talks fast, and they may misunderstand indirect requests (e.g. "I'd like to share." versus "Give me the toy."). Nonverbal signals used in body language, and sarcasm may also be difficult for the child with a receptive language disorder to understand.

Examples of expressive language disorders include leaving off endings of words (e.g. "ing"), and leaving out little words such as "is" and "are" in sentences. Word order and grammar are often incorrect (e.g. "Book me give."). These children may also have the following difficulties.

- have a limited vocabulary
- mix up words such as "remind" and "remember"
- use nonsense or made up words without realizing it

Children with language disorders may have problems with social language. For example, they may be

overly direct or blunt; they may change topics abruptly and interrupt each other often. They may not understand turn taking in conversation.



Early intervention can help children communicate effectively and can alleviate some of the frustration parents and children feel.

Children who have problems with any of these aspects of language will have trouble understanding others, making themselves understood, and/or participating appropriately in social situations.

Intervention

Evaluation and intervention services are important for improving speech and language skills. The earlier intervention services begin, the better the chance of successful language use.

A speech-language pathologist is a professional who is specially trained to evaluate individuals, provide intervention services, and counsel families. The clinician's evaluation of your child may include assessing attention span, short- and long-term memory, comprehension of individual words and grammatical forms, length of phrases or sentences, use of appropriate grammatical structures, and use of language in different

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contexts and with different people. Evaluation of these areas may also include reading and writing.

The speech-language pathologist will develop strategies to help your

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child with the parts of language that are troublesome. Intervention often will focus on improving speaking, listening skills, reading, and writing. Treatment may take place in structured communication settings and then extended to natural settings such as the home and classroom.

It is important to help your child feel successful in his or her communication attempts. Your speech-language pathologist will work to build on your child's strengths while targeting problem areas. A supportive environment will help your child build on communication successes.

Additional Resources

For information about IDEA (the Individuals with Disabilities Education Act), request the ASHA's "Let's Talk" entitled, "Individuals with Disabilities Education Act," or log onto the IDEA Partnerships Web site at www.ideapractices.org or the U.S. Department of Education Web site at www.ed.gov/offices/OSERS/IDEA.

ASHA also offers three free brochures that provide additional information. The first is entitled, "How Does Your Child Hear and Talk?" that includes a developmental

milestone checklist that can help parents identify possible speech, language, and hearing problems. This brochure is also available in Spanish and Chinese. The other two brochures, entitled "Getting Ready for Reading and Writing," and "Literacy and Communication: Expectations From Kindergarten Through Fifth Grade" focus on written language. These brochures are available from ASHA's Action Center.

General Indicators of Child Language Disorders*

- absence of words by age 18 months
- absence of two-word phrases that have a message by age 2 years
- inappropriate responses to questions
- echoing of speech
- poor intelligibility of speech (unclear speech)
- undeveloped play skills
- poor understanding or use of adjectives (descriptive words) and prepositions (in, out, under, etc.)
- word-finding problems
- dependence on gestures to follow directions
- need for frequent repetitions of directions

- poor social interaction with peers (does not get along with other children)
- poor school performance

**By Sharon Willig, Georgetown Child Development Center*)))

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If you have concerns about your child's speech or language development, please contact an ASHA-certified speech-language pathologist. Go to ASHA's website at www.asha.org for information and referrals or call 800-638-8255.



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