SPEECH AND LANGUAGE DEVELOPMENT

- In young children –

An

INFORMATION PACKAGE
SPEECH AND LANGUAGE

DEVELOPMENT

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Thank you for your enthusiasm and interest in your child’s language development and the ways you can help. It is hoped that this package is both informative and useful.
**ARTICULATION**

Articulation is the production of speech sounds and their sequencing in words. Different sounds are created by using the lips, tongue, teeth and palate. The development of the articulation of sounds is gradual over time. Most children develop speech sounds generally in the same order and at the same age as one another. (Refer to Normal Articulation Development Chart).

**Types of Articulation Errors:-**

* Substitutions: Using one sound for another.  
  e.g. saying “fum” for thumb or “wabbit” for rabbit

* Omissions: Leaving out sounds.  
  e.g. saying “ba” for bath or “hou” for house

* Distortions: ‘Slushy’ sounds.  
  e.g. lisping – using ‘th’ for ‘s’ (th”thun” for sun) and/or slushy productions of “s”

* Additions: Adding extra sounds  
  e.g. “baloo” for blue

These articulation errors may occur by themselves or simultaneously and have an affect on speech clarity. Sound errors can occur at the beginning, middle or end of words. It is important to be aware that speech or articulation errors are not due to laziness.
NORMAL ARTICULATION DEVELOPMENT

The following is a list of sounds and the age at which 75% of Australian children produced the sound correctly in single words.
(Kilminster & Larid, 1978)

<table>
<thead>
<tr>
<th>AGE</th>
<th>SOUND</th>
<th>Initial Position</th>
<th>Medial Position</th>
<th>Final Position</th>
</tr>
</thead>
<tbody>
<tr>
<td>3 years</td>
<td>m</td>
<td>mine</td>
<td>hammer</td>
<td>arm</td>
</tr>
<tr>
<td></td>
<td>n</td>
<td>no</td>
<td>honey</td>
<td>man</td>
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<tr>
<td></td>
<td>h</td>
<td>hair</td>
<td>happy</td>
<td>cup</td>
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<tr>
<td></td>
<td>p</td>
<td>pear</td>
<td>finger</td>
<td>ring</td>
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<td></td>
<td>ng</td>
<td></td>
<td>flower</td>
<td></td>
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<tr>
<td></td>
<td>w</td>
<td>walk</td>
<td>ladder</td>
<td>mud</td>
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<tr>
<td></td>
<td>d</td>
<td>dog</td>
<td>butter</td>
<td>sit</td>
</tr>
<tr>
<td></td>
<td>t</td>
<td>tap</td>
<td>yoyo</td>
<td></td>
</tr>
<tr>
<td></td>
<td>y</td>
<td>yes</td>
<td>baby</td>
<td>club</td>
</tr>
<tr>
<td></td>
<td>b</td>
<td>big</td>
<td>tiger</td>
<td>egg</td>
</tr>
<tr>
<td></td>
<td>g</td>
<td>go</td>
<td>pocket</td>
<td>look</td>
</tr>
<tr>
<td></td>
<td>k</td>
<td>car</td>
<td></td>
<td></td>
</tr>
<tr>
<td>3.5 years</td>
<td>f</td>
<td>fire</td>
<td>telephone</td>
<td>rough</td>
</tr>
<tr>
<td>4 years</td>
<td>l</td>
<td>lizard</td>
<td>yellow</td>
<td>ball</td>
</tr>
<tr>
<td></td>
<td>sh</td>
<td>ship</td>
<td>pushing</td>
<td>fish</td>
</tr>
<tr>
<td></td>
<td>ch</td>
<td>chair</td>
<td>kitchen</td>
<td>catch</td>
</tr>
<tr>
<td>4.5 years</td>
<td>s</td>
<td>soap</td>
<td>racing</td>
<td>grass</td>
</tr>
<tr>
<td></td>
<td>z</td>
<td>zebra</td>
<td>scissors</td>
<td>nose</td>
</tr>
<tr>
<td></td>
<td>j</td>
<td>jump</td>
<td>soldier</td>
<td>bridge</td>
</tr>
<tr>
<td>5 years</td>
<td>r</td>
<td>rabbit</td>
<td>orange</td>
<td></td>
</tr>
<tr>
<td>6 years</td>
<td>v</td>
<td>vegemite</td>
<td>seven</td>
<td>stove</td>
</tr>
<tr>
<td></td>
<td>consonant blends</td>
<td>splash, blue, tree, frog</td>
<td>library aeroplane</td>
<td>ask</td>
</tr>
<tr>
<td>8 years</td>
<td>th (voiced)</td>
<td>this</td>
<td>brother</td>
<td>With</td>
</tr>
<tr>
<td>8.5 years</td>
<td>th (voiceless)</td>
<td>thumb</td>
<td>nothing</td>
<td>mouth</td>
</tr>
</tbody>
</table>
**LANGUAGE DEVELOPMENT**

Language is understanding and using the words and grammar that build sentences using these skills in conversation.

Language acquisition is an amazing process. Most children learn the rules of language without anyone teaching them. Some children develop sooner than others do. Girls tend to develop more quickly than boys. Multiple births tend to develop more slowly.

There are three main areas of language:-

* **Receptive Language**

The understanding of concepts, vocabulary and grammar (the rules of language) necessary to process information and follow instructions.

* **Expressive Language**

The use of words, sentences and stories to express ideas, feelings and thoughts to convey information.

* **Pragmatics**

This is the social element of language – the way language is used to communicate. This is referred to as conversational skills, and includes taking turns to speak, keeping on the topic and using eye contact.

Errors are a normal part of learning new things. Children’s understanding skills develop more quickly than their expressive language skills. Refer to “Normal Language Development” checklist.
# Normal Language Development

Adapted from
Western Sydney Area Health Service: Communication Workshop

<table>
<thead>
<tr>
<th>Age</th>
<th>Behaviour</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 month</td>
<td>- responds to voice and sounds</td>
</tr>
<tr>
<td>3 months</td>
<td>- cooing “oo oo ah ah”</td>
</tr>
<tr>
<td>4 months</td>
<td>- responds to noise and voice by turning</td>
</tr>
<tr>
<td>6-9 months</td>
<td>- babbling “ba”, “gee”</td>
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<tr>
<td></td>
<td>- understands ‘;no’ name, “where’s...?”</td>
</tr>
<tr>
<td></td>
<td>- uses sing-song patterns like adult speech</td>
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<tr>
<td></td>
<td>- waves “by” in imitation</td>
</tr>
<tr>
<td></td>
<td>- turns when hears own name</td>
</tr>
<tr>
<td>9-12 months</td>
<td>- 2-part babbling “dada”, “gee gee”</td>
</tr>
<tr>
<td></td>
<td>- enjoys babbling to self and with others</td>
</tr>
<tr>
<td></td>
<td>- tries to copy sounds “brum” for car</td>
</tr>
<tr>
<td></td>
<td>- may use sound patterns that mean something to baby, but aren’t real words</td>
</tr>
<tr>
<td></td>
<td>- waves/claps when asked</td>
</tr>
<tr>
<td>12-18 months</td>
<td>- expresses wants by gestures, actions and facial expressions</td>
</tr>
<tr>
<td></td>
<td>- points to objects when named</td>
</tr>
<tr>
<td></td>
<td>- begins to use single words including:</td>
</tr>
<tr>
<td></td>
<td>naming words (eg) ‘mummy’, ‘car’</td>
</tr>
<tr>
<td></td>
<td>action words (eg) ‘go’, ‘drink’</td>
</tr>
<tr>
<td></td>
<td>negatives (eg) ‘no’, ‘gone’</td>
</tr>
<tr>
<td></td>
<td>number words (eg) ‘lots’, ‘more’, ‘again’</td>
</tr>
<tr>
<td></td>
<td>- uses one word for many meanings, so ‘drink’ can mean.</td>
</tr>
<tr>
<td></td>
<td>A thing (eg) ‘big drink’</td>
</tr>
<tr>
<td></td>
<td>An action (eg) ‘drink milk’</td>
</tr>
<tr>
<td></td>
<td>A place (eg) ‘in drink’</td>
</tr>
<tr>
<td></td>
<td>A possession (eg) ‘my drink’</td>
</tr>
<tr>
<td></td>
<td>- sometimes jabbers using sounds which seem to be words but can not be understood by adults.</td>
</tr>
<tr>
<td>18-24 months</td>
<td>- begins to put 2 words together. Should be using different combinations including:</td>
</tr>
<tr>
<td></td>
<td>Person/Object + Action (eg) “Daddy go”</td>
</tr>
<tr>
<td></td>
<td>Person + Object (eg) “Daddy (go) car”</td>
</tr>
<tr>
<td></td>
<td>Action + Object (eg) “Drive car”</td>
</tr>
<tr>
<td></td>
<td>Action + Place (eg) “Go (in) car”</td>
</tr>
<tr>
<td></td>
<td>Person/Object = Place (eg) “Daddy home”</td>
</tr>
<tr>
<td></td>
<td>Owner + Object (eg) “Daddy car”</td>
</tr>
<tr>
<td>Age Range</td>
<td>Developmental Stages</td>
</tr>
<tr>
<td>-----------</td>
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</tr>
</tbody>
</table>
| 2 – 3 years | - Uses sentences of 3-5 words  
- Talks in the present tense (eg) “Me fall down”  
- Not all sentences are correct, but child begins to use some grammatical words and endings:  
  - ‘in’ (eg) “Daddy in car”  
  - ‘ing’ (eg) ‘riding bike”  
  - ‘s’ plural (eg) “see cars”  
  - ‘l, me, my it, you’ (eg) “You go” |
| 3 – 4 years | - Begins to use sentences that are correct. The meaning of most sentences is clear.  
- More grammatical words and endings appear including:  
  - ‘is’ (eg) “That is blue”  
  - Irregular past tense (eg) “ran, came, went, saw, fell”  
  - ‘s’ possessive (indicating ownership) (eg) “boy’s car”  
  - ‘a’ and ‘the’ (eg) “The car is going”  
  - ‘he’ and ‘she’ (eg) “He is running”  
- Child can answer questions like “What’s a cup for?”  
- Child asks lots of questions |
| 4 – 5 years | - Nearly all sentences are correct  
- Child can tell long stories about own experiences  
- Knows common colours (eg) ‘red, blue, yellow..’  
- Begins to use more complicated sentences including these words and endings:  
  - ‘s’ on actions (when talking about another person/object) (eg) “The dog walks”  
  - Questions “who?”, “what?”, “where?”  
  - Negatives “not”, “can’t”, don’t”  
  - “does” and “has” (eg) “daddy does that”  
  - Uses short form of “is”, “are”, “am” (eg) “She’s nice”. “We’re going”. “I’m happy”  
  - “his”, “her” (eg) “That’s his car” |
| 5 – 6 years | - Language is ‘adult like’ – sentences are long and complicated  
- Child uses:  
  - Joining words (eg) ‘and’, ‘but’, ‘because’  
  - ‘er’ (eg) “He’s bigger”  
  - ‘est’ (eg) “That’s the biggest” |
| 6 – 7 years onwards | - vocabulary continues to expand  
- continues to learn complicated words  
- may make errors when trying to use new or difficult sentence structures such as:  
  “The boys has been swimming”  
  “If he falls out of the tree and he get in trouble”  
  but most sentences should be correct  
- begins to understand abstract language:  
  such as implied meaning (eg) “It’s cold!”  
  meaning “Close the window” |
LANGUAGE STIMULATION

THINGS YOU CAN DO TO HELP YOUR CHILD’S LANGUAGE DEVELOPMENT

Talking to children
The language adults use when talking to children is very important for early language learning. There are simple techniques that can be used to make the task of language learning a little easier. These include talking more slowly, using fewer words and simpler sentences, with more repetitions. Some suggestions of how to do these things are listed below.

1. Speak slowly and clearly
If you speak too fast the child may not be able to understand what you are talking about and a clear example or model lets them hear the words that they will be trying to say.

2. Use simple words
Use short, simple words to describe the objects and actions which your child is involved with in daily experiences.
   E.g. teddy, dog, cat, boy, give, push, run, jump, pat
It may be a good idea in the early stages to leave out little words like “a”, “the”, so that the child can focus on learning the main words which give the most meaning.
   E.g. “open door” rather than “please open the door for me”

3. Don’t talk too much.
The more you talk the less opportunity your child has to take part in any exchange or conversation. Remember that the more a child talks, the more they learn about how to use their language.

4. Extend the child’s language
When talking to your child, try to extend what they are saying by providing the example for them.
   E.g. Your child says “Mummy eat”
   You say “Mummy eat toast”
5. Encourage your child when they talk
   You can easily show your child that you are interested in what they have to say by responding to what they are doing and saying.
   E.g. Yes, it’s a blue cup”/“that’s right, push the car!”

6. Encourage your child to talk more
   If your child is hesitant, you can encourage them by giving them part of the sentence.
   E.g. “Give ball to __________(Daddy)”
       “It’s a __________(doll)”

Remember that children need to hear clear examples of language and to have plenty of opportunities to practice using their language in the preschool years. The way we talk to children is important in all the child’s natural settings – in the home, at preschool and in the wider community. It is important to remember that communication involves interaction between you and your child and your example can make your child’s task of learning to talk much easier.
**STUTTERING**

What is Stuttering?

Children who stutter have problems with the flow of speech. The may be demonstrated by a number of speech behaviours. The most common of these are:

- Repetitions repeating sounds or parts of words such as “m-m-m-mummy”
- Blocks – silence as the child attempts to speak. This can be accompanied with signs of struggle to talk
- Prolongations – drawing out a sound in the word such as “c-aaaaaa-an I have that?”

What Causes Stuttering?

The cause of stuttering is unknown. However we do know:

- It is not related to low intelligence or being nervous
- Stuttering may become worse when people are nervous or in a tense situation, but anxiety is not the cause of stuttering.
- Stuttering is a problem with the movement patterns necessary for speech – it is a talking problem rather than a thinking problem.
- Most people who stutter have some family history of stuttering.
- Stuttering usually begins before the age of five, and should be treated as early as possible.

Can Stuttering be Treated?

Effective treatment is available for people who stutter, from an age of 18 months to adulthood. The treatment is most effective for young children who begin treatment soon after stuttering begins. Preschool and school aged children are treated using a behavioural approach, which trains parents to help the child in controlling their stutter.
VOICE

Voice is the sound produced by vibration of the vocal cords. The vocal cords are muscular bands across the voice box. Air pressure from our lungs causes the vocal cords to open and close rapidly making the noise we call voice.

Voice includes the following areas:

- **Pitch** - How high or low a voice is.
- **Volume** - How loud or soft a voice is.
- **Quality** - How clear the voice sounds, e.g. is the voice hoarse or husky?

Difficulties in any of the above areas may indicate a voice disorder. This may be the result of incorrect use of the voice, a physical problem (such as vocal nodules) or a psychological problem.

A common children’s voice disorder occurs as the result of vocal abuse. Vocal abuse includes too much yelling or shouting, constant loud talking or throat clearing, tension in the throat while talking and making harsh noises with the voice (such as animal noises).

If the abuse is persistent it may result in vocal nodules which are like small callouses on the vocal cords.
**WARNING SIGNS**

From the section on ‘Normal Communication Development’, it can be seen that there is a wide range around normal. However, there are a number of ‘warning sings’ that can be seen in a child who may benefit from speech pathology services.

Some features of children who could benefit from Speech Pathology:

Any child who:

- has difficulty understanding others and following instructions
- gets frustrated by their communication difficulty
- has dysfluencies and repeats sounds, words. (Stuttering) (e.g. c-c-c-cat)
- has a hoarse, breathy or nasal sounding voice, or if they lose their voice regularly

At what age should I worry?

If by 18 months you child:

- has no words.
- has a limited vocabulary.
- didn’t play with sounds much as a baby or “babble”.

  - The more complex the child’s babbling, the more likely they are to developing normally.
  - Babbling that has consonants is more complex than babbling with just vowels (eg. “bababa” is more complex that “eooee”).
  - Also the range of consonants they use is important. (eg if a baby says “bababa”, “mamama”, “dadada” etc is using more complex babbling than a baby who only says “bababa”.)
If by 2 years, your child:

- is not using 2 word sentences (eg doesn’t say “mummy shoe” etc)
- doesn’t have a wide range of words (eg less than 50)

If by 3 years, your child:

- is difficulty to understand (they may use different sounds in words, eg “gog for “dog”, “tat” for “cat”, “dit” for “fish” etc)

If you toddler (aged between 1 and half and 3):

- doesn’t imitate word combinations.
- Doesn’t “play” with their toys. (i.e. the toddler will only “fiddle” with a toy, not use the objects in meaningful way – talking on a toy telephone – or symbolically – “talking” on a banana which is being used as a pretend telephone.)
- Doesn’t exhibit many gestures which accompany speech. (Many children use gestures to add meaning to their utterances, particularly when making the transition between one and two words utterances, eg. the child may say ‘no’ and shake their head, or say “juice” shake their head, meaning, “no juice”.)
- Doesn’t initiate interaction with peers, or don’t interact much with kids their own age.

If by 4 and a half, your child:

- Has difficulty saying these sounds: /s,z,r,l,v,j/
Helping Children at Home

Facilitative Play: Play that encourages language development

Play is important for language development, it is more than simply “fun”.

Facilitative play is play that facilitates language development. It functions to connect a child’s actions with the language that can be used to describe them. Play can be used to teach a child about controlling their environment, in addition to other uses for language such as, requesting information from others, giving information about ourselves, discovering the reasons for performing daily tasks, such as sleeping and eating.

Facilitative play is an enjoyable way you can encourage language development with your child that can be incorporated into daily activities. You may find that you already do some of these things:

- The first step is choosing play items that your child is interested in.
- Then play with the item yourself (this is “parallel play”). This allows you to show appropriate communication and play skills to your child.
- The next step is to let your child take the lead. Now you talk about and do what the child wants to do.
- Here are some things that you can say and do to expand your child’s language:
  - “Self talk”: You talk about your own actions as you play with your child. This gives a clear and simple demonstration of actions and words and how they are related. For example, if your child is pretending to bathe a baby, you copy them saying, “I’m bathing the baby, see me washing the baby, wash the baby!”.
o “Parallel talk”: You talk about your child’s activity as they do it, similar to a running commentary at the football. For example, “You’re washing the baby, you put soap on her hair, you’re washing it off, baby’s all clean!”

o “Expansions”: This technique requires you to expand your child’s utterances, to make them acceptable adult sentences. For example, if the child says “Up!”, requesting to be picked up, then you might respond by asking, “Can you please pick me up?”.

o “Extensions”: These are comments that add extra meaning to the child’s remark, To use the previous example, if you’re at the zoo and your child says, “Up”, you might add, “You want to be picked up to see the giraffes.”
SOME IDEAS FOR WORKING

WITH YOUR CHILD
**RISK FACTORS**

There are other factors that can put a child at risk for delayed communication development. If a child demonstrates one or more of the above behaviours and also experiences one of the below, they would probably benefit from speech pathology services.

- If the child’s family has a history of speech and language problems. *(eg mother, father, or sibling has a communication problem)*
- If the child has a history of frequent ear infections.
Using Toys to Develop Specific Skills

Adapted from material by Laurel House, Parent Education Group & Fairfield Sector Speech Pathology Team

Books

- Share books regularly with your child
- Look at pictures and discuss what you see
- You don’t need to read the words, make the story simple and discuss what will happen next
- Pause while reading the books to encourage your child to initiate
- As you tell the story, ask a few questions
- Have fun with rhythm and rhyme – sing nursery rhymes, finger plays and songs
- Make your own books together

- Duplo/Peg Boards etc – focus on:
  - Colours
  - Sizes
  - Actions (push, pack away)

Balls, Beanbags, skittles etc – talk about:

- Actions (push, throw, catch)
- Places (in the box, on the floor)
- Names
**Playdough – talk about:**

- Actions (cut, roll, pinch)
- Shapes (circle, star)
- Textures (soft, lumpy)

**Colouring – talk about:**

- Labels (car, house)
- Colours
- Sizes (big, bigger, biggest)

**Puzzles – talk about:**

- What your child is doing
- What the objects are
- What the objects do
- What noises they make
References


What to do if you think

Your child has

Speech and Language difficulties...

Your child is in a peak development stage around the ages of 2-4 years which makes it an ideal time for learning correct sounds and language foundations in readiness for school. It is during this period that children are most receptive to learning and therapy results are accelerated!

If you have read this information and are concerned about your child’s speech and language development the following options are available...

1. Contact your local Community Health Centre. While this is a free service, long waiting periods usually apply.

2. Contact Speech Pathology Services We can provide immediate assessment and treatment of your child.