SPEECH, LANGUAGE, AND HEARING DISORDERS IN CHILDREN

Many signs can indicate that a child has a speech, language, or hearing disorder. Simple signs include not responding when spoken to or not speaking at all, while less obvious ones include excessive crying and throwing tantrums.

Speech sound disorders may be easier to recognize. For example, a child may have a speech sound disorder if sounds that are typically pronounced correctly by 1 or 2 years are mispronounced most of the time. Additional signs include tension when producing words, excessive pauses when speaking, or repetition of sounds.



Language disorders vary in the way they manifest, and signs can appear in the way children write, speak, or comprehend language. Children may have a language disorder if they seem unable to understand what others say, do not babble, have fewer than 50 words, or have problems with early reading and writing skills.

A child with a hearing loss might show a lack of attention to sounds, not respond to his or her name, have difficulty following simple directions, or demonstrate speech and language delays. Because hearing is critical to speech and language, children with hearing loss may show problems in these areas as well.

Parents with concerns about their child's speech, language, or hearing should seek out services from professionals such as speech-language pathologists (speech and language) and audiologists (hearing). Intervention at an early age can lead to significant gains at home, in school, and in daily life.



THE IMPORTANCE OF EXPRESSIVE AND RECEPTIVE LANGUAGE DEVELOPMENT IN EARLY CHILDHOOD

Expressive language is the use of words, sentences, and gestures to convey meaning. Children use expressive language in several ways and for a myriad of reasons, such as pointing at and labeling objects, answering questions, and asking for help. Building expressive language in early childhood is essential, not only because it allows children to express their various wants and needs, but it also encourages their interaction with their peers, parents, and caretakers. Receptive language is language processing and comprehension. To successfully communicate, it is essential to master both expressive and receptive communication skills.

There are many components involved in effectively using expressive communication, including the ability to focus on a task and maintain eye contact. For example, a child must be able to focus during a conversation in order to successfully participate in turn taking.

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ASK A THERAPIST

TEACHING TWO-PART VOWEL SOUNDS (DIPHTHONGS)

The term "diphthong" is derived from Greek and translates to "two sounds." Single vowels make simple sounds, but when two of them are combined, they form diphthongs. Some common diphthongs include the "oi/oy" sound as in "boy," and the "ou/ow" sound as in "cow." When slowly pronouncing the diphthong in the word "boy," you can hear the transition from the quick "oh" sound into the longer "ee" sound.

Children who struggle with their vowel sounds may have an even harder time pronouncing diphthongs. Distinguishing the sounds comprising a diphthong, as well as the mouth movements required to produce them, can be a difficult skill to master. To make this skill acquisition easier for your child, you can physically show them the difference between a simple vowel sound and a complex diphthong. First, start by having your child hold his or her hands against the sides of your mouth. Next, say the simple vowel sounds one at a time. Do you notice any movement in your mouth? (Answer: You shouldn't!)

While still holding your fingers against your mouth, begin to say diphthongs such as "oi/oy" and "ou/ow." This time you should feel the parts of your mouth moving, such as your teeth, cheeks, and jaw. You can make the movements more evident for your child by either saying the diphthongs more slowly or by exaggerating the two sounds comprising the diphthongs. By more closely examining the muscle movements that produce diphthongs, your child should become more aware of the motor movements required for correctly pronouncing these complex sounds.

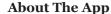
APP OF THE MONTH:

Peekaboo Barn Lite



Ages 4+

Target SkillsLanguage



This app helps children build language and play skills through a variety of fun activities!

The Importance of Expressive and Receptive Language Development in Early Childhood Continued...

Facial expressions, gestures, and other nonverbal cues are also involved in expressive communication. As strong communicators know, the addition of a wink or a smirk can change the meaning of a sentence. Some children may find more success expressively communicating through the use of augmentative and alternative communication (AAC), such as an iPad or picture exchange system.



There are many ways to encourage expressive language. Naming items together is a simple way to engage both their fine motor skills and their ability to focus on a task. This can be done with objects in the room, pictures in a book, or objects seen together while driving. Additionally, intentionally withholding items needed for everyday tasks is an easy way to encourage children to make requests. For example, parents can set the dinner table with everything except the silverware uses to eat, or they can leave the toothbrush on the bathroom sink but hide the toothpaste. Instead of merely bringing their child the missing items, parents can prompt their child to recognize the missing items and then request them.

The compliment to expressive language, receptive language is the ability to understand and process information. Children use receptive language when listening to verbal directions, perceiving visual information within the environment (e.g., understanding it's time to go to the park when mom gets the stroller), and by associating specific stimuli with meaning (e.g., a red sign meaning "stop"). As with expressive language, receptive language is crucial for successful communication.

Understanding the various ways words and stimuli can shape meaning makes communication more enjoyable for children, thus encouraging them to listen more closely, be more aware of their environment, and ultimately learn more. Children who have difficulties with receptive language may have trouble answering questions, following directions, or may be unaware of signs that appear obvious.

Improving receptive language begins by obtaining the child's eye contact before giving them any instruction; this will at least partially ensure that you have their attention. Start by only providing one direction at a time and simplify the language you use to provide that instruction. You can also introduce visuals to clarify meaning, such as showing pictures or videos, pointing to objects of interest, and modeling what you want the child to do.

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Farrell, L. (2010, February 1). The Difference Between Diphthongs And Digraphs.

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SPEECH THERAPY SPOTLIGHT Kristin Flannigan

About Kristin Flannigan

Kristin Flannigan was born and raised in Missouri and moved to California in August 2014. Her first love was the Spanish language which prompted her to pursue a bachelor's degree in Spanish at Truman State University. After graduating in 2003, she went on to work in the community, soon after returning to the university to work. In 2011, she found her next love in communication disorders. Graduating in December 2014 with her



master's, Kristin hit the ground running at Aspire Speech and Learning Center. She has continued to hone her skills as a clinician and has found areas of professional interest in childhood apraxia of speech, early intervention, working with individuals that have Autism, augmentative and alternative communication, bilingualism, and working with Spanish speakers. Outside of work, Kristin enjoys spending time with her church family, singing, visiting the coast or the mountains, crocheting, reading, and relaxing.

Three words Kristin uses to describe herself *Empathic, Positive, Includer*

Why Kristin loves being a speech therapist

I love being able to see clients do what they didn't think was possible, and to change how they think about themselves. Seeing them excited about their successes makes my job worthwhile.

Kristin's favorite things

Some of my favorite things are a job well done, the smell of rain before you see it, a good book, and time spent with friends and family.

What people are saying about Kristin Flannigan

"Kristin is a very wonderful speech therapist, who is always finding creative ways to keep my son engaged in therapy. She has been a valuable asset."

"Kristin is awesome! How she works with my son is amazing. We appreciate her patience and love the activities she does to grow my child's pragmatic language."

"I couldn't be happier with Kristin! We see so much progress through my son's work at Aspire Speech and Learning Center."

Would You Like Additional Copies of this Newsletter to give as a *FREE* Resource?



If so, email us at:

Grow@AspireSpeech.com
Please include the address of your office & how
many additional copies you would like.



Concerned About Your Child's Speech or Development?

Call us today for a free consultation (559) 228-9100

About Aspire Speech & Learning Center

Aspire Speech and Learning Center, formerly Center for Communication Skills, is a premier provider of speech therapy services and academic support in the greater Fresno area. Kathryn Wage and her team of experienced speech therapists have a long-standing and well-deserved reputation for providing services that improve the lives of their clients. The therapists are well known for supporting parents in improving optimum functional outcomes for their children. The practice has grown rapidly since moving to the California Learning Connection and provides services through a wide range of payer options, both public and private, and receives referrals from top pediatrician practices and elite preschools around Fresno. We offer free consultations to prospective clients to help determine the best fit for our offerings.

Contact Aspire Speech & Learning at Grow@AspireSpeech.com or call (559) 228-9100

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