



Praxis für
Stimm- und Sprachtherapie

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Short information:
Developmental
language disorder

DEVELOPMENTAL LANGUAGE DISORDER

A late start of speaking, reduced vocabulary, poor articulation, poor or incorrect syntax can be signs for a disorder in the development of language skills.

Developmental language disorder is a term used when the process of language acquisition comes completely or partly to a stop, or shows a clearly delayed course. Language development starts already long before a child begins to speak his/her first words. Already at the beginning of the pregnancy, the unborn child develops biological pre-conditions for the acquisition of language. Around the age of two, most children dispose of a vocabulary of at least 50 words. Difficulties in the acquisition of language can emerge in various areas depending on the age of the child.

Articulation and pronunciation difficulties: Difficulties during phonation and articulation due to an impairment of the motor nerves, difficulties as regards the combination of sounds, difficulties as regards the acquisition of the mother tongues sound system

Vocabulary difficulties: Difficulties in the acquisition of vocabulary, meaning of words and finding of words

Difficulties in understanding language: (see flyer: language disorders) Reduced understanding of words, sentences, texts, difficulties to follow a conversation

Problems in the usage of grammar: Difficulties as regards the acquisition of the grammar of the mother tongue, problems with sentence construction, grammar rules for tenses, plurals etc.

Difficulties to express oneself linguistically: Limited capability to linguistically express desires and facts, hardly enjoys speaking, almost no talent as regards the use of language

Difficulties in the acquisition of reading and writing as a consequence of a developmental language disorder

The **LINGUISTIC ASSESSMENT AND DIAGNOSIS** help to find out whether a child suffers from a delay in its linguistic development and to determine the linguistic developmental level of the child from which intervention can start. It is worked out whether some or all areas of linguistic development are concerned.

Generally it is necessary to divide between two linguistic areas: the assimilation and use of language (understanding) and speech and language production. Before any linguistic assessment and speech and language therapy start, it is imperative to consult a physician to see whether any organic problems might be the cause for the problematic linguistic development. Reduced aural functions impede the acquisition of language. Cognitive skills and motor functions have to be checked by a physician to be able to properly evaluate the results of the linguistic assessment.

The physiological and mental (cognitive) development of the child as well as its motor activities and the emotional development play an important part in successful language acquisition. Interdisciplinary co-operation and early consultation of the parents are necessary here.

OBJECTIVE OF THE THERAPY:

Speech and language therapy focuses on the individual level of speech and language development as regards the understanding and production of speech and language.

Speech and language therapy makes use of the linguistic knowledge of the “typically” developed child. The therapy imitates the path of linguistic acquisition of children whose linguistic development shows a typical course. The stage of development of the child is exactly determined so that the child can be specifically offered a suitable quantity and quality of linguistic stimulation. In this way, the child gets the opportunity to fill the gaps of its linguistic knowledge by learning it him/herself. So the child is not taught or forced to simply repeat the words that were said or to learn these just by heart.

Objectives of speech and language therapy – examples for the different areas:

- skills concerning the recognition of sounds
- correct sound acquisition
- acquisition of the sound system of the mother tongue
- to build and strengthen the vocabulary
- confidence as regards naming and retrieval of words

- linguistic understanding with view to words, sentence and text
- acquisition of grammatical rules
- linguistic skills to express oneself
- transfer of spoken language into writing

POSSIBLE CAUSES

Physiological, psychological as well as social factors can be the underlying reason for developmental speech and language disorders. Developmental speech and language disorders in connection with physiological abnormalities are for instance the malformation of the organs of speech and voice apparatus, cerebral disorders, aural function disorders, weaknesses in areas responsible for the translation of the “heard”. Psycho-social factors that might be hindering to the development of a child’s speech and language skills are determined by the social conditions under which a child grows up, the psychological experiences and behaviour. However, there seem to exist speech and language related developmental disorders without the influence of the above-mentioned factors. Developmental speech and language disorders often emerge also in connection with an impaired ability as regards the acquisition of written language. Often growing up bilingually leads to disabilities as regards the acquisition of both languages.

Language therapy should start as early as possible to prevent any further stagnation of speech and language development. On the other hand, it is rarely too late to support and further a child to guarantee a successful time at school. Sufficient language development is directly associated with success at school. It is self-understanding, that depending on the age of the child, therapeutic main points vary. Speech and language therapy in early interventions differ from therapies for children of kindergarden or school age. (kindergarden – German nurseries starting from the age of 3 to 6 or 7)

Besides the therapy, there are a number of ways for parents to support and further a child’s development linguistically, which assist the therapy as well:

- comment your and your child’s activities, e.g. when shopping or cooking you can have your child name the objects or ask for smaller tasks to be fulfilled. Your language has a model function for your child at which he/she orientates his/herself. Speak clearly and well structured when talking to your child.
- Consult your therapist to find out at which developmental level your child is at the moment so that you can adapt your language accordingly and your child does not become stressed due to a too high level of linguistic demand.
- Listen to your child. Have conversations. Do not correct your child when forms are faulty or the sentence structure is incorrect. It is better to correct what your child said while repeating or completing it – so the child gets a chance to learn from your model.
- Children songs are a good possibility to further language. The pressure to produce something is taken away from the child. Also when drawing, painting or playing games language can be furthered.
- Book-sharing activities or bedtime stories are situations in which you further language in a way that is joyful and probably much loved by your child. Have your child describe the images or repeat together with your child parts that you just read out. Yet, avoid asking over and over again, otherwise your child might loose interest in it.

Here it is up to you and your creativity as regards the various ways in which to offer speech and language to your child. The essential ingredient however remains – besides all furthering -the joy of speaking and communication!