

# Pinpointing Problems Early Makes a Big Difference

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Parents often wonder how well their child's speech and language skills are developing. Communication skills are extremely important to a child's future well being. Discovering any problems early gives a child a better chance to learn how to communicate successfully. A child who has difficulties can work with a speech-language pathologist (S-LP) who is specially trained to help people with communication problems.

Communication problems are not uncommon.

- One in 10 Canadians has a speech, language or hearing problem.
- An estimated four per cent of the preschool population has a significant speech or language problem.
- About one per cent of Canadians and four per cent of preschoolers stutter. Men are four times more likely to stutter than women.

## What are the most common communication problems in children?

**Articulation problems** — This is a difficulty with pronouncing sounds to make words. There are many reasons children have difficulty in making sounds. These include hearing problems, poor muscle control, cleft palate and lip or learning problems. However, often there is no apparent reason for the problem so it is called “a specific speech impairment” (delay of unknown origin). Children develop sounds in a particular order. English-speaking children learn most sounds by six or seven years. With other languages, such as Cantonese, youngsters develop the sounds earlier as they are less complex to learn. The speed at which children learn their sounds depends on the complexity of the sounds being mastered. As children develop their speech sounds it is not uncommon for them to make single types of errors like “tat” for “cat,” do.—” for “dog” or “shshssoup” for “soup.” Similar types of errors can be noted in other languages.

Sometimes children do not make single sound errors but have trouble learning “sound patterns.” For example, classes of sounds may give the youngster difficulty, such as replacing every sound that should be made at the back of the throat like “k” and “g” with “t.” The child may make words like “tap” for “cap,” “tup” for “cup” and so on. Every language has rules about how sounds can be combined to make words. If a child has trouble with specific rules and develops unique patterns like those just described, he might have a “phonological disorder.” In this situation, the speech-language pathologist helps the child to learn classes of sounds, rather than just specific sounds.

**Language problems** — These problems can be expressive (what the child says) receptive (what the child understands) or a combination of both. Expressive language difficulties can show up in problems with grammar, as in “Him is mean,” or vocabulary such as calling a “lion” a “tiger.” Receptive problems can show up in misunderstanding what is said, including difficulty following instructions or answering questions strangely - for example, answering “What do you do at night?” with “Pajamas.” Sometimes children have trouble learning the context in which certain language is used. They get themselves into trouble and appear to be rude by talking, for example, to a teacher as to a friend, saying “Hey gimme a pencil!” instead of “May I have a pencil please?” Problems with reading and writing can also show up in this area.

**Voice disorders** — A problem with a child's voice is determined by whether the voice matches the

speaker's age and gender and has a pleasant sound to it. A pleasant voice is one that is not too loud nor soft, neither breathy nor harsh and not too nasal or hypo-nasal (how we sound when we have a cold). Before seeing a speech-language pathologist, it is important that a child be seen by an Ear, Nose and Throat (ENT) physician to rule out the possibility of a medical condition for the voice problem.

**Fluency disorders (stuttering)** - With this type of problem, the child has difficulty with the flow or rhythm of speech. The smooth flow of speech can be interrupted in a number of ways: repeating sounds, syllables, words and phrases, prolonging sounds, or using interjections such as “urn.”

### **My Child is Stuttering. What should I do?**

Children who are still learning to talk often go through a period somewhere between the ages of two and five of what is called normal non-fluency, also known as stuttering. These behaviours are characterized by repetitions of whole phrases or words, as in “I like, I like, I like ice cream,” or “My, my new cat is nice.” Be aware that this is a normal part of your child's speech development. Act in ways that promote easy smooth speech. Children are great imitators and often will copy you. Speak more slowly; listen to what is said, not how it is said; communicate well by pausing when you talk to give your child a chance to talk and letting him finish his own sentences; and show attention by nodding occasionally and looking interested in what he is saying.

Signs that your child's stuttering may be becoming more of a concern include:

- Repeating sounds and syllables three times or more, as in “The ha-ba-ba-baby is happy”
- Using a higher pitched or louder voice when prolonging a sound
- Drawing out or prolonging a sound for more than one second, such as saying “ssssssssssssssoup”
- Showing signs of impatience or fear when stuttering or avoiding talking altogether
- Using “escape” behaviours such as nodding or blinking to break out of stuttering
- Tensing up and hurrying through repetitions
- Blocking the airflow or interrupting the voice during speech

If you are concerned that your child's stuttering is becoming a problem, speak to a speech-language pathologist.

### **By what age should children be using certain sounds?**

There is quite a wide range in age in which sounds are learned, as children vary in their development. The table below is a general guide to show by what age most English-speaking children will be using a sound.

<b>Age</b>	<b>Sounds Acquired</b>
3	m,n,h,w,p
4	b,t,d,k,g,f
5—6	v,j,s,l,r
7	z,ch,sh,th

As a rough guide, your child's speech should be understood by a stranger:

- 25 per cent by age one,
- 50 per cent by age two,
- 75 per cent by age three, and
- 90 per cent or greater by age four.

Remember that not all sounds will be perfect until Grade 1 or, at the latest, Grade 2.

### **How many words should my toddler be using?**

On average, a child should use at least 200 words by the age of two. By the age of four her vocabulary should be at least 2000 words. As general benchmarks, consider whether your child can:

- Say her first word by her first birthday
- Combine two words, for example “Mommy up” by age two
- Use three-word phrases and short sentences by age three, like “Puppy come here”
- Use four or more word sentences by age four, as in “I like to play dolls”

### **When should I visit or speak to a speech-language pathologist?**

Seek answers if your child:

- Shows no reaction to sound in the first three months of life
- Is not babbling and making sounds by 10 months
- Doesn't gesture, show, give or point to get something by 12 months
- Doesn't understand simple commands like “See your ball? Get your ball!” by 18 months
- Doesn't pretend play, like feeding a stuffed toy, by 18 months
- Is not using single words by 21 months
- Doesn't understand a variety of simple concepts like “big-little, up-down” by 24 or 36 months
- Is not joining two or three words by 27 months
- Is extremely difficult to understand at age three - the listener has to guess extensively about what the child is saying
- Doesn't understand or is unable to reason questions like “What do you do when you're hungry/cold” by the age of three or four
- Continues to make numerous grammatical errors at age five so that the communication burden falls to the adult to figure out what's been said
- Shows other communication problems, or you have a sense that something is just not quite right with the child's way of communicating or interacting

Finding speech and language problems early in children is very important. If you are concerned about your child's speech, discuss your concerns with your family doctor. If necessary, speak to a speech-language pathologist. Contact your local health unit or hospital for information, check the yellow pages or contact the Canadian Association of Speech-Language Pathologists and Audiologists 1-800-259-8519 or [www.caslpa.ca](http://www.caslpa.ca)