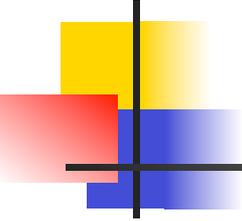


# Speech and Language Development and Identification of Disorders in the 0-3 Population

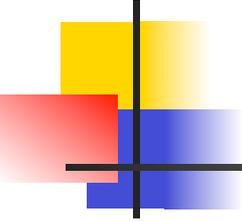
---



# Speech-Language Pathologist Professional Roles

---

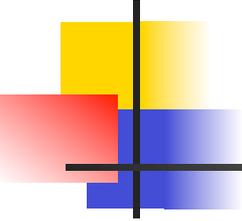
- Evaluate and diagnose speech, language, cognitive-communication, and swallowing disorders
- Treat speech, language, cognitive-communication, and swallowing disorders in individuals of all ages, from infants to the elderly



# Early Intervention Roles and Responsibilities

---

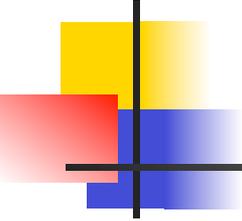
- Qualified to address delays and disabilities in communication, language, speech, emergent literacy, and feeding/swallowing within the infant/toddler population
- Prevention
- Screening, Evaluation, and Assessment
- Planning, Implementing, and Monitoring Intervention



# Early Intervention Roles and Responsibilities

---

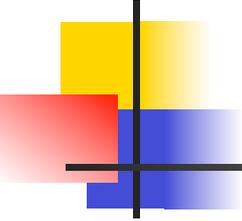
- Consultation and Collaboration with the Family and Other Team Members
- Service Coordination
- Transition Planning
- Advocacy



# Typical Speech and Language Development

---

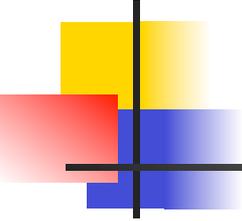
- 0-6 months: vegetative sounds, cooing, laughing
- 0-8 months: caregivers primarily attribute intent to children's actions
- 6-10 months: reduplicated and variegated babbling
- 8-12 months: understands 5-50 words



# Typical Speech and Language Development

---

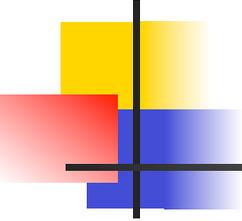
- 8-12 months: first words used for names of familiar people and objects; communicative games and routines; to talk about appearance, disappearance, and recurrence
- 8-12 months: Expresses intent primarily with gestures and vocalizations to: request, refuse, direct attention, and participate in communicative games



# Typical Speech and Language Development

---

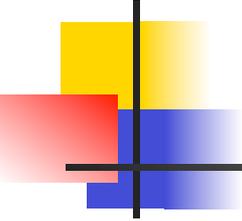
- 8-12 months: on average 2.5 communicative acts per minute within free play
- 12-18 months: first 50 words develop
- 12-18 months: words typically consist of a single syllable (e.g., boo)
- 12-18 months: beginning to use words to get needs and desires met



# Typical Speech and Language Development

---

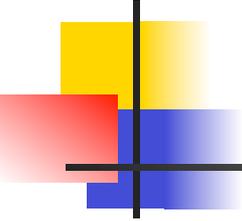
- 18 months: average expressive vocabulary size – 50 to 100 words
- 18-24 months: understands names of items that are not present
- 18-24 months: understands two-word “semantic relations” (e.g., noun+action, adjective+noun, boy is running, big hat)



# Typical Speech and Language Development

---

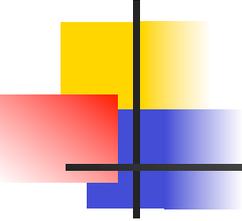
- 18-24 months: beginning to use two-word combinations
- 18-24 months: no grammatical markers in combinations
- 18-24 months: speech is about 50% understandable to others, two-syllable words emerge



# Typical Speech and Language Development

---

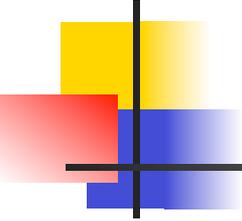
- 24 months: uses about 200-300 words
- 24-30 months: beginning to understand basic questions (e.g., what?, where is the toy?, what am I doing?)
- 24-30 months: beginning to talk about objects that are not present
- 24-30 months: 2-3 word combinations become increasingly present



# Typical Speech and Language Development

---

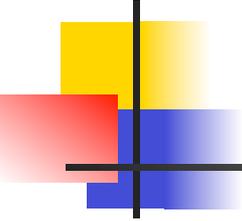
- 24-30 months: uses /b/, /p/, /m/, /n/, /t/, /d/, /h/, and /w/ sounds within words
- 24-30 months: sometimes drops the last sound of a word
- 30-36 months: understands more location words (in/out, on/off, under)



# Typical Speech and Language Development

---

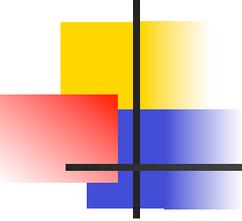
- 30-36 months: Follows 2-step directions
- 30-36 months: Marks plural /s/ and -ing grammatical markers with increased consistency
- 30-36 months: fully acquire /k/ and /g/ sounds, speech is understandable to others at least 75% of the time



# Typical Speech and Language Development

---

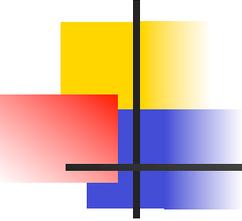
- 30-36 months: Increasingly asking basic questions (e.g., where did it go?)
- 30-36 months: Using increased word combinations (2-4 word combinations)



# Red Flags

---

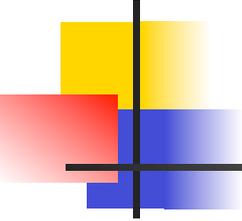
- Decreased social engagement
- Low affect: does not laugh or smile
- Avoids eye contact
- Does not respond when name is called
- Open mouth posture and drooling
- Child is difficult to understand
- High frustration and/or anxiety



# Red Flags

---

- Is very quiet, does not talk or babble often
- Does not understand what is said
- Plays inappropriately with toys
- Plays with only a few toys
- Plays the same way with toys every time
- Difficulty staying with one activity or toy

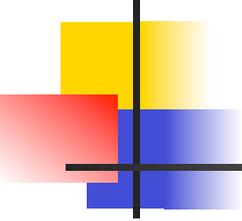


# Facilitation Strategies for Language Development

---

“Play is often talked about as if it were a relief from serious learning. But for children play is serious learning. Play is really the work of childhood.”

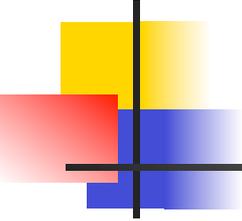
- Mr. Fred Rogers



# Facilitation Strategies for Language Development

---

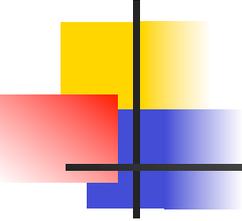
- Embedding consistent target words in daily life and play routines
- Providing wait time after you model a word
- OWL – Observe, Wait, and Listen
- Follow their lead and what they are interested in



# Facilitation Strategies for Language Development

---

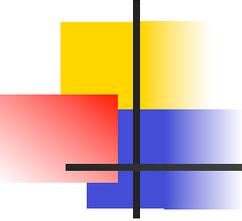
- Give choices (e.g. Do you want a cookie or cracker?)
- Interpreting the child's message and giving them a word
- Expanding upon what a child says (e.g., Child: cookie, Parent: big cookie)
- Providing visual supports (gestures, pointing) within routines to promote understanding



# Facilitation Strategies for Language Development

---

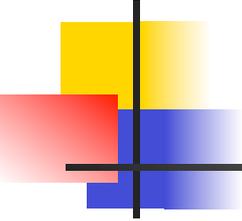
- Using the 4 S's (Say less, Stress, go Slow, and Show) and Repeat, Repeat, Repeat!
- Try to keep your 2-3 word combinations short but still not ungrammatical between words (e.g., the baby's *drinking* vs. baby drink cup)
- Play! Play! Play!



# Bilingual/Multilingual Language Development

---

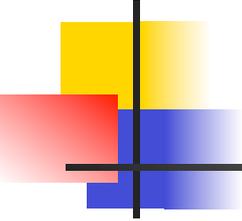
- Simultaneous development
- ESL: English as a Second Language
- Code Switching
- Myths:
  - Multilingual children will fall behind
  - It's confusing for children with or without language delays to learn more than 1 language at one



# Bilingual/Multilingual Language Development

---

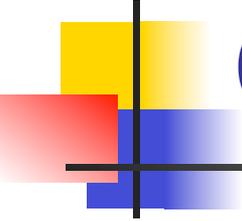
- Facts:
  - The critical period for language-learning begins to close around 5 years of age and ends around puberty.
  - It is unknown how many languages a child can learn simultaneously.
  - A very young child knows which language to speak to different people.



# Bilingual/Multilingual Language Development

---

- Should I only speak only English to my child with a language delay/disorder?
  - Child will begin to lose first language which impacts second language development
  - Child will miss out on language learning opportunities in their home
  - Child will miss out on cultural, social, and emotional experiences within their family and neighborhood



# Questions? Comments?

---

Thank you!