

## Special Education Support Service: Information on Verbal Dyspraxia

Dyspraxia is treated in the literature under two separate headings – Developmental Co-ordination Dyspraxia (DCD) ([See separate factsheet for more information on DCD](#)) and Developmental Verbal Dyspraxia (DVD) or Verbal Dyspraxia as it is more commonly known. Children may present with either DCD or DVD or a combination of both.

The literature on DVD has grown considerably in recent years and readers who wish to read more extensively about the subject are advised to consult the references given below.

### **Definition**

Verbal Dyspraxia or Developmental Verbal Dyspraxia (DVD) has been defined by Ripley, Daines and Barrett (1997) as 'a condition where the child has difficulty in making and coordinating the precise movements which are used in the production of spoken language, although there is no damage to muscles or nerves' (p.43)

### **Characteristics**

Developmental Verbal Dyspraxia (DVD) is essentially an expressive language disorder having some or all of the following characteristics.

- It can be difficult to understand what the child with DVD is trying to say. In severe cases the child's speech may be unintelligible. The listener may have to rely on context or gesture in order to understand what the child is saying.
- There may be a history of difficulty with feeding, sucking, chewing. Children with verbal dyspraxia may be regarded by parents as messy eaters. It is important for teachers to take a case history. It is also important that they access reports written by other professionals involved with the child such as Speech/Language Therapists or Occupational Therapists.
- The child with DVD frequently has difficulty producing on request the speech sounds and phrases he/she is capable of producing in spontaneous speech.
- The child with DVD frequently struggles to produce words or sounds; facial distortions may accompany his/her struggle to produce targeted sounds.
- The child may have a limited range of consonant and vowel sounds. It is important that the teacher find out from the Speech/Language Therapist the range of sounds the child is capable of producing.
- DVD impacts not alone on the child's phonological system but also on his/her ability to accurately sequence sounds and syllables in words and sometimes words in sentences. These difficulties may impact on the child's ability to sequence his/her thoughts in a coherent manner.
- Speech may be slow and lacking in normal phrasing and intonation. As a result the child's speech may sound very flat and what he/she is communicating may not sound very interesting. This may result in the child's not communicating what was intended.

- There may be problems with volume control (too loud / too quiet); this can give rise to difficulties in a classroom setting. There may also be difficulty with fluency. Within the individual child the level of dysfluency may oscillate from mild to severe at different times.
- Dyspraxia impacts on the child's language and these children frequently communicate using short, simple sentence structures.
- The child with DVD may be slow to initiate communication and may be reluctant to communicate verbally, particularly in group situations.
- Some children with DCD/DVD may present as expressionless or with 'flat' expressions, reacting blankly to either facial or bodily language. This may be construed as lack of interest, defiance or not bothering. In reality these children may be experiencing difficulty with those muscles involved in the regulation of facial expression
- The child with DVD may experience difficulty reading facial or body language
- Developmental Verbal Dyspraxia may impact on the child's willingness and ability to mix with same age peers, which in turn could impact on the development of age-appropriate social skills.
- Even with relatively able children progress **may** be slow in overcoming the difficulties arising directly and/or indirectly from DVD.
- No two same-age children presenting with verbal dyspraxia are likely to have the same profile

### **The Child with DVD in the Classroom**

The child who experiences Developmental Verbal Dyspraxia is likely to experience some degree of concomitant learning difficulties. DVD impacts on the child's functioning in school in a number of different ways. It is not possible to say in advance to what extent a child's verbal dyspraxia will undermine his/her learning or what level of severity of DVD is associated with what form of school difficulty. It is important, however, for the teacher to be aware of the possible difficulties that **may** arise for the child with DVD.

- Children with DVD may present with limited concentration and attention.
- There may be receptive and/or expressive language difficulties. They may experience difficulty following directions and instructions, acquiring vocabulary and may have difficulty learning grammatical features such as plural markers and tense endings.
- They may experience particular difficulty acquiring the language of space and time
- Difficulties are likely to be experienced with the acquisition of reading. This difficulty is likely to be most acute at the initial stage of learning to read when phonological difficulties may impact on the child's acquisition of a range of phonological awareness skills. This has implications for the phonic / phonological awareness approach used in the classroom. It is important that the teacher be aware of the range of sounds that the child is capable of producing.
- The learning of spellings is likely to be seriously affected, with speech distortions impacting on the child's production of the required sound sequences.

- Where a child presents with DVD, the difficulties experienced in reading and spelling combine to undermine writing abilities. Content of written material may be low, with phonological problems undermining skills in this area. Similarly, a difficulty in organising and sequencing expressive language to express thoughts and ideas will impact on the ability to write longer passages such as descriptions and essays.
- Where the child also experiences DCD, writing and related skills of cutting and colouring will also be affected.

### **General Guidance for the Teacher**

- Reduce your rate of speech. This will aid the child's processing of what is being said. It is also good modelling for the child who talks too fast.
- Encourage child to reduce his/her rate of speech and, where necessary, to use gesture to aid intelligibility
- Provide clear models for sound production
- Provide encouragement so that the child perseveres with what he is trying to communicate
- Encourage the child by listening and accepting what he is attempting to communicate, at the same time modelling and expanding on what he has said.
- It is not a good idea constantly to correct the child's speech; it is better to pick certain times/situations when you focus in on sounds he/she should be using. Modelling/expanding may be employed in an understated, implicit manner at other times.
- When children with verbal dyspraxia are communicating it is important that they concentrate on what they are saying. It is important, particularly with younger children, that they are not engaged in trying to do some other task while they are trying to talk to you.
- Children with Dyspraxia / DVD require considerable encouragement if they are to develop sufficient confidence to contribute in group discussions or small-group situations.
- The teacher should encourage children to initiate conversations; conversations can be more meaningful and interactive when you focus on what the child is doing or on the child's interests.
- Allow additional response time for children with verbal dyspraxia; this allows them to stop, think about what they want to say and organise how they are going to say it. This will also allow them employ strategies they have learned in speech therapy sessions for specific sounds.
- Don't worry if you cannot understand what the child is trying to communicate, sometimes other children in the class can decipher what is being said. This is a strategy, however, that has to be employed with care; otherwise a situation could arise where the child with verbal dyspraxia takes a back seat and allows others do the talking for him.
- Don't ask for repetitions – the child is likely to either 'clam up' or tell you something else. Instead, identify for the child that portion of what he/she has said that you understand, asking him/her to clarify the parts of the sentence you did not get, encouraging him/her to do so in a slow, steady voice.
- Try not to complete sentences for the child

- Use visual cues to increase intelligibility. The child with verbal dyspraxia may learn better using a do/see approach rather than an oral/aural approach
- Particularly with younger children or children whose speech is particularly unintelligible, home/school journals can be helpful, as a means of communicating their interests and experiences.
- Teachers need to be cognisant of the language they use in the classroom (instructions, explanations etc) and ensure that the child is following what they are saying. Sometimes there is a need to restate an instruction in a simpler manner.
- Children with verbal dyspraxia are, in most respects, no different from other children and they will quickly sense that you are interested in trying to communicate with them. Relaxed interaction, with lots of verbal and non-verbal signals that you are listening, such as eye contact, nodding head, repeating the words that you 'get' as the child talks, are all more likely to impact positively and encourage the child to talk.
- Remember to praise the child for the efforts he makes no matter how big or how little

## **Curriculum-Related Guidance**

The child with verbal dyspraxia may have concomitant receptive language difficulties and/or concomitant expressive language difficulties ([See separate factsheet on Specific Speech and Language Disorder for more information on these areas](#)).

It is important not to take for granted that the child will either understand or be able to use the specific vocabulary associated with curricular areas such as maths. Explicit teaching of such vocabulary is likely to be required.

The child with verbal dyspraxia is likely to experience difficulty with spatial and temporal concepts; they are likely to require explicit teaching of body parts, prepositions, directionality (right/left), number / letter orientation, sequencing days of the week or months of the year, number / letter sequences, ordinal numbers, concepts such as before/after, beginning/middle/end; sequence of the day; sequencing a happening; sequencing stories; following recipes.

- » Use Visual Cues where possible
- » Use concrete materials for the teaching of maths
- » Highlighters can be used effectively for marking out important aspects of text.

Because of the phonological difficulties that these children experience they are likely to require explicit teaching of rhyme, syllabification, sound awareness / discrimination / synthesis / segmentation etc.

Where a child is either not ready or is experiencing series difficulty with learning to spell, a number of different strategies can be tried such as a portable electronic 'spellcheck' or a class dictionary of all the words that the child uses regularly.

Many children with verbal dyspraxia need to learn the rules of conversational interaction such as eye contact, turn taking, topic sequence, appropriate interruptions, topic closure etc.

Attention and listening skills can be improved by ensuring that: background noise and distraction is limited when giving verbal instructions; the number of sequences in instructions is limited; the child is clear about school/class rules; routines are clearly established; eye contact is made with the child before giving instructions.

Seating is important as the child with verbal dyspraxia who is sitting with his back to the teacher is not in a good position to 'pick up' on additional verbal/visual cues which may aid his/her understanding

It can be difficult to settle on an appropriate reading scheme for use with children with verbal dyspraxia. Things to look out for include the amount of print on the page, the amount of visual distractors such as pictures or range of colours. It is important to assess whether the language used in the text is at an appropriate level for the child in question. For younger children or children in the beginning stages of learning to read it may be helpful to cover text above and below the line the child is reading. With older children, use of highlighter pens allows them to identify key aspects of text/story.

Because of their speech difficulties and, in many cases, inability to produce targeted speech sounds, being required to read aloud in class has the potential to cause embarrassment and humiliation.

