

Special Education Support Service: Information on Specific Speech and Language Disorder

Definition:

1. From the **Special Education Review Committee Report (1993):**

Pupils with specific speech and language disorders are those whose non-verbal ability is in the average band or higher and whose skill in understanding or expressing themselves through the medium of spoken language is severely impaired. Their disability is not attributable, however, to factors such as defective hearing, emotional or behavioural disorders or a physical condition. The disorders may involve difficulty with one or more of the main components of communication through spoken language, receptive and/or expressive, such as patterning and production of speech sounds, the message content, the syntax and grammar, or the use of speech in interacting with other people (pp. 91-92).¹

SERC identifies the following criteria for the identification of SSLD which are embodied in **Circular 08/02:**

*Such children should meet **each** of the following criteria:*

Assessment by a psychologist on a standardised test of intelligence which places non-verbal or performance ability within the average range or above;

Assessment on a standardised test of language development by a speech therapist which places performance in one or more of the main areas of speech and language development at two standard deviations or more below the mean, or at a generally equivalent level;

The child's difficulties are not attributable to hearing impairment; where the child is affected to some degree by hearing impairment, the hearing threshold for the speech-related frequencies should be 40Db;

Emotional and behavioural disorders or a physical disability are not considered to be primary causes.

Children with speech and language delays and difficulties are not to be considered under this category.

2. DSM-IV Definition

The DSM-1V list diagnostic criteria for expressive language disorders, mixed receptive and expressive disorder and phonological disorder separately. They do not offer diagnostic criteria for receptive language disorder as a separate entity. A diagnosis of a language disorder is made when:

✓ *There is a substantial difference between the child's language abilities and their non-verbal performance as registered on standardised measures of language*

✓ *The language difficulties interfere with academic, occupational achievement or with social communication*

✓ *The language difficulties do not meet the diagnostic criteria for other disorders²*

From the perspective of teachers working in Ireland, however, the most pertinent definition is that put forward by the Special Education Review Committee (SERC) cited above.

¹ Ireland, Department of Education. (1993). Report of the special education review committee (SERC). Dublin: Stationery Office.

² Diagnostic and Statistical Manual of Mental Disorders 4th. Ed. Text Revision (2000) American Psychiatric Association.

Common Characteristics:

A language disorder may be defined in terms of impaired comprehension and/or impaired use of language. This disorder may impact on language form (phonology, morphology, syntax), language content (semantics) or language function (pragmatics). The child may present with a phonological disorder, a language disorder or a combination of both. A language disorder may affect any or all of the areas of language and communication including vocabulary, word meaning, concept formation, the application of grammatical rules, syntax and comprehension. The rate and sequence of language development in the child with a language disorder is atypical.

A language disorder is not a homogeneous disorder and there is little consensus about the sub-classification of the language difficulties that children experience. Traditionally the disorder has been classified along the lines of receptive or expressive disorders. However, a child's difficulties may not fall into such neat categories and a child with an expressive disorder may also present with significant comprehension difficulties. Where the child presents with a mixed receptive and expressive disorder both expression and understanding are impaired. Within either receptive or expressive language classifications many different types of language problems may be observed. Change with age may also reflect changes in the range of language problems children present with. Difficulties in receptive or expressive language may range between mild and severe.

Specific Language Disorder is not a static condition. The linguistic profile of those presenting with a language disorder is subject to change with age: changes in linguistic profile may vary over time from relatively little to quite significant. It is not uncommon for children who present with speech and/or language difficulties in the early stages of language development to go on to develop adequate language skills with no long-term adverse affects on their learning. In other cases the effects of a language disorder in the preschool years, while seemingly remediated, may at a later stage in the child's schooling impact on their acquisition of language-related activities such as reading and writing. Where a child experiences ongoing language difficulties which continue to present into and through the primary school years, the nature and severity of the disorder may not only change with age, but the severity of the impact of the disorder on their ability to access the curriculum as well as their social communicative skills may only gradually emerge over

time. Those aiming to provide for the appropriate educational intervention for children with language disorder need to be cognisant of the changing nature of the disorder over time, its likely impact on learning, particularly reading, writing, spelling and maths all of which have implications for programme planning.

Receptive Language Disorder

Children who present with a receptive language disorder have normal intelligence and adequate hearing but cannot make sense of what they hear. Their receptive language difficulties affect their understanding of oral language; this difficulty is most marked with information presented entirely through the auditory channel. Comprehension is a prerequisite to expressive language development. Comprehension involves a host of separate sub-skills such as the ability to discriminate between speech sounds, the ability to recognise vocabulary and the ability to decode complex sentences.

Children who experience receptive language difficulties may present with limited vocabulary. They may also have restricted application of vocabulary knowledge – that is they may understand a word used in one context but fail to grasp its meaning when used in combination or when used in more complex language structures. Where children present with severe receptive language disorder they may exhibit echolalia, that is, they repeat words without understanding what they are saying.

Some or many of the following features may be experienced by children with receptive language disorder:

- ✓ difficulty processing and retaining auditory information
- ✓ difficulty following instructions and directions
- ✓ their difficulty understanding what is said may be exacerbated in group discussions
- ✓ their difficulty answering questions may be related to their limited understanding of question forms
- ✓ they may be overly sensitive to non-linguistic sounds
- ✓ they may have difficulty filtering out background noise
- ✓ they may be easily distracted
- ✓ they may exhibit pragmatic difficulties such as poor understanding and use of tone, facial gesture, body language and poor eye contact
- ✓ because of their comprehension difficulties they may experience difficulty with turn-taking in conversation
- ✓ language limitations may interfere with topic maintenance
- ✓ they may experience difficulty with verbal reasoning
- ✓ they may experience difficulty remembering strings of words
- ✓ they may not discriminate between tones

- ✓ they may experience difficulty with sound discrimination
- ✓ their memory for sound and sound sequences may be impaired
- ✓ they may experience problems developing phonological representations of new words and therefore have a smaller vocabulary
- ✓ problems with sound and sound sequencing may lead to later reading, writing, spelling difficulties
- ✓ a receptive language disorder may lead to later reading comprehension difficulties
- ✓ there will be associated expressive language difficulties
- ✓ they may have difficulty with establishing and maintaining peer relationships

Expressive Language Disorder

Although expressive language includes gesture and alternative communicative forms in this context the term refers mainly to the use of oral language for communication. Children whose language disorder takes this form experience difficulties expressing themselves at the word, phrase, sentence, multi sentence and/or conversational levels. Expressive language difficulty interferes with the ability to use age-appropriate vocabulary, concepts and grammar to communicate wants, needs, desires thoughts and ideas. Difficulties with expressive language can interfere with academic or occupational achievement or with social communication.

Some or many of the following features may be experienced by children with expressive language disorder:

- ✓ understanding of language is likely to outstrip ability to communicate using the spoken word.
- ✓ there may be a reticence to talk
- ✓ the child may resort to pointing or gesturing to get their message across
- ✓ expressive language may lack variation in intonation or volume
- ✓ imaginative play and social use of language may be impaired
- ✓ difficulty in describing, defining and explaining and in retelling stories may surface in communication in class
- ✓ limited vocabulary may mean that the child resorts to empty phrases and non-specific vocabulary
- ✓ expressive language difficulties may impact on the child's ability in relation to writing, spelling, composing sentences/compositions and answering all but the most straightforward questions
- ✓ there may be evidence of omission of function words such as *the* and *is* and grammatical markers such as tense endings
- ✓ the child may produce sentences that are not developmentally appropriate in length or complexity
- ✓ the child may experience difficulty in formulating full sentences. The child may be able to articulate single words but has difficulty with combining words to form sentences and with the application of morphological and syntactic rules.
- ✓ they may have limited vocabulary and deficits in relation to word meanings and word associations
- ✓ they may have restrictions in word meanings with particular difficulty experienced in relation to multiple word meaning

- ✓ they may have difficulty with establishing and maintaining peer relationships

Word finding is another aspect of expressive language with which children with language disorder may experience difficulty. Problems with remembering and expressing words may lead children with this difficulty to substitute synonyms for words they are attempting to retrieve or to use non-specific words instead of the targeted word.

What can I do as a teacher?

General Strategies aimed at increasing participation and communication:

- ✓ As the child with specific speech and language difficulty may have additional difficulties which impact on his/her learning it is important that the child sits near the teacher. This will facilitate both teacher and child in utilising the prompts, cues or other strategies employed to engage the child.
- ✓ Before initiating a conversation it is important to make eye contact with the child. This will ensure that you have his/her attention.
- ✓ Depending on the child's language difficulties it may be important to simplify your language. This will facilitate communication.
- ✓ Use a slower speech rate. This will facilitate the processing of information through the auditory channel. It is important, however, that speech rate is not so slow as to lose continuity in the message.
- ✓ Simplify sentence structure. Teacher language should be aimed at the level of language functioning of the child. This will aid the decoding of incoming information.
- ✓ Where children experience serious difficulty with the understanding of what is being said, repetition, exaggeration, modelling, gesture and the rephrasing of sentences should be used to aid communication. Depending on the age of the child it sometimes helps to involve the child in selecting the strategy that works best for them.

Receptive language learning can be facilitated through:

- ✓ use of clear simple directions and instructions
- ✓ use of gesture and repetition
- ✓ use of sentence structures and vocabulary that are within the child's range of communication
- ✓ strategies to develop (a) concentration and attention
 - (b) short-term auditory memory
 - (c) visualization and conceptualisation skills
 - (d) listening skills
- ✓ minimising distractions within and outside the classroom.

The development of expressive language can be facilitated through

- ✓ provision of a rich but carefully structured environment which encourages exploration through the senses and concomitant use of language

- ✓ development of vocabulary with progression from concrete to abstract
- ✓ focussing discussion on what is tangible and what is important to the child
- ✓ explicit teaching of grammatical features such as prepositions, adjectives and word meaning such as homonyms and synonyms
- ✓ use of role-play as a regular feature of language learning. This helps alternate speaker/listener roles
- ✓ careful selection and regulation of language used so that the system is not overloaded.

Systematically record information about the child and pass it on to the child's next teacher, resource teacher or secondary school. This is best done in conjunction with the child's parent(s) where you discuss with them the information you intend communicating to the next teacher/school.

References / Extra Resources

1. Castle, F., Blamires, M., & Tod, J. (1999). *Individual Education Plans: Speech and Language*.
London: David Fulton ISBN: 1853465224 Cost: £16.00
2. Dockrell, J. & Messer, D. (1999). *Children's Language and Communication Difficulties*.
London: Cassell Education ISBN: 0304336580 Cost: £17.00
3. Fleming, P., Miller, C. & Wright, J. (2001). *Speech and Language Difficulties in Education: Approaches to Collaborative Practice for Teachers and Speech and Language Therapists*.
Speechmark: Oxfordshire ISBN: 0863883753 Cost: £6.95
4. Martin, D. (2000). *Teaching Children with Speech and Language Difficulties*.
London: David Fulton ISBN: 1853465852 Cost: £13.00
5. Ripley, K., Barrett, J. & Fleming, P. (2001). *Inclusion for Children with Speech and Language Impairments: Accessing the Curriculum and Promoting Personal and Social Development*.
London: David Fulton ISBN: 1853467294 Cost: £17.00
6. Rustin, L., Cook, F., Botterill, W., Hughes, C. & Kelman, E. (2001). *Stammering: A Practical Guide for Teachers and Other Professionals*.
London: David Fulton ISBN: 1853467146 Cost: £19.00
7. Stuart, L., Wright, F., Grigor, S. & Howey, A. (2002). *Spoken Language Difficulties: Practical Strategies and Activities for Teachers and Other Professionals*.
London: David Fulton ISBN: 185346855X Cost: £17.00

8. Thompson, G. (2003). *Supporting Communication Disorders: A Handbook for Teachers and Assistants*. London: David Fulton ISBN: 1843120305 Cost: £17.00