# Special Issues in Infants' Speech and Language Development Dr (Mrs.) Florence A. Undiyaundeye

Department of Early Childhood Care Development Education Federal College of Education, Obudu, Cross River State, Nigeria Email: atube2001@vahoo.com

Doi:10.5901/mjss.2013.v4n14p11

#### Abstract

Infants start learning language when they hear and respond to familiar voices. The process of speech and language development milestones helps to tell whether a child is developing a language as expected. Thus, certain skills such as babbling, saying "mama" or "dada" or putting two words together and gestures to say what it means and understand what others say are identifiable. A child usually needs to master one milestone before reaching the next. Some type of hearing loss can cause speech delay. Children with a speech delay should have their hearing tested. This could be caused by developmental disorders such a autism, which can cause speech delay. This paper examines special issues in infants' speech and language development Speech and language problems are estimated to occur in about 6 out of 100 children. That means 94 out of 100 children could develop normally. Mild and temporary speech delays can occur. Some children learn new words faster than others do. If the child is not saying any word by 18 months or says fewer than 50 words by 24 months, specialist attention is required. The ages at which children reach milestones vary from child to child. Some children especially girls are advanced in speech and language than boys. A child who is surrounded by speech and language all the time usually learns language faster. The remedy for speech and language defect can be resolved or improved as prescribed by providing strategies for speech and language development. The paper accordingly points the way forward as a guide to all speech and language teachers, parents and caregivers.

#### 1. Introduction

Speech and language are the skills used by humans to communicate with others. These skills are formed within the first years of life. By age six, most children learn the basics: try to talk and when parents read to these kids often, it boosts the skill of speech and language. Speech represents the making of sounds that become words - the physical act of talking. Language is our system of using words to communicate. It has two parts; using words and gestures to say what we mean and understanding what others say. Babies start cooing at around 2 months and babble at about six months.

As children grow from infancy to toddlerhood, early childhood and so on, parents are often keenly aware of what their child should be doing at any given age. One of the areas that frequently causes parents great anxiety is the development of speech. This initial babbling that sound like words are celebrated (Sehlou 2000). Despite this, some parents still wonder if their child's speech development is delayed.

Speech comes in a variety of ways. Based on the individual, speech development manifest in the following stages as opined by Candel (2005). At seven days, an infant can distinguish the mother's voice from another woman's voice. At two weeks, the infant can distinguish father's voice from another man's voice. At three months, vowel sounds are noticed. By six to eight months, the child has added a few consonant sounds to the vowel sounds earlier acquired and may say "dada" or "mama" but can not attach them to individuals. By one year, the infant will attach "mama" or dada" to the right person and respond to one step command such as "give it to me". By eighteen months, a toddler can say nouns (i.e. names of special people and objects in his or her life and a few action words or phrases. The infant also adds gestures to the speech and may be able to follow a two-step command "go to the bed and get the toy". By two years, the child can combine words to form simple sentences like "daddy go" or "Mummy go". By three years, the child can use sentences to form words that are long, follow simple instructions and often repeat words he or she had over heard in conversations. By four years, the child can understand most sentences, physical relationships (on, in, under), use sentences that are four of five words long, can say his/her name, age and sex and use pronouns. Strangers can also understand the child's spoken language. In the process of language development in infants, the girls seem to acquire language faster than boys (Candel 2005).

Since the development of speech varies, it is important not to compare a particular child's language development to other children's language development. If there is suspicion that a child is having a delay in either receptive or expressive language, it should be discussed with the family physician or pediatrician. The child may be evaluated and sent to appropriate professionals who specialize in speech and language evaluation.

Although problems in speech and language differ, they often overlap. A child with a language problem may be able to pronounce words well but be unable to put more than two words together. Another child's speech may be difficult to understand but he or she may use words or phrases to express ideas. Another child may speak well but have difficulty following directions.

## 2. Warning Signs of a Possible Speech Problem

In a given child's speech and language development, the following problems may be observed in the child as opined by Miller and Mockerts (2012):

- Not responding to sound or vocalization between twelve and twenty-four months
- Not using gestures such as pointing at or weaving bye-bye by twelve months
- ➤ Preference for gestures over vocalizations or communicates by 18 months.
- ➤ Has trouble imitating sounds by 18 months
- > Has difficulty in understanding simple verbal request
- > Can only imitate speech or actions and does not produce words or phrases spontaneously at 2 years
- Says only certain sounds or actions repeatedly and does not use oral language to communicate more than his or her immediate needs.
- Cannot follow simple directions by two years
- ➤ Has an unusual tone of voice such as raspy or nasal sounding.

Parents and caregivers are expected to understand about half of a child's speech at two years and about three quarter by three years and by four years, a child should be mostly understood even by people who are not familiar with the child.

## 3. Causes of Delayed Speech or Language

In a growing child, it is good to note that there are potential developmental delays in children as they develop. Many things can cause delays in speech and language development. These could be by oral impairments like problems with the tongue or palate (the roof of the mouth). A short frenulum (the fold beneath the tongue) can also limit tongue movement for speech production (Owens 2012).

Many kids with speech delays have oral-motion problems meaning there is inefficient communication in the areas of the brain responsible for speech production (Ruther 2003). In this case, the child encounters difficulty using and coordinating the lips, tongue and jaw to produce speech sounds (Hill 2001). Speech problem may be accompanied by other oral-motion problems such as feeding difficulties.

Furthermore, ear infections, especially chronic infection, can affect hearing ability if not noticed on time or properly treated. Hearing problems are also commonly related to delayed speech which is why a child's hearing should be tested by an audiologist whenever there is a speech concern. A child who has trouble hearing may have trouble articulating as well as understanding, imitating and using language. Sometimes a delay occurs in different types of developmental delays in infants as language or speech, vision, movement-motion, social and emotional, thinking and cognitive skills. These defects are referred to as "global developmental delays". These delays occur for the following reasons: genetic defect like down syndrome, fetal-alcohol syndrome caused by a mother drinking alcohol during pregnancy, fragile syndrome which is an inherited type of cognitive impairment, severe medical problems developing after birth often associated with prematurity. These warning signs for different types of delays are signs that may show up from infancy to age two years (Mclean, 2001).

In conducting a speech evaluation, a speech-language pathologist will look at a child's speech and language skills within the context of total development and conduct standardized tests and scales to look for milestones in speech and language development. The assessment would be based on what the child understands – receptive language, what the child can say – expressive language, if the child can communicate in other ways like pointing, headshaking, gestures etc, sound development and clarity of speech and the child's oral motor status (i.e. how the child's mouth, tongue, palate work together for speech as well as eating and swallowing. Nelson (2010) observed that if the speech pathologists discover that a child needs therapy, parent's involvement becomes pertinent and requires participation in the therapy sessions. The parents would now require education on the process to work with the child at home to improve speech and

language skills.

## 4. Strategies for Improving Speech and Language Development

Speech development is a mixture of nature and nurture. Genetic make up determines intelligence speech and development. A lot of it depends on environment. A child's adequate stimulation at home or at child care, gives rise to communication exchange and participation. The kind of feedback a child gets through early intervention provides the help a child needs. (Nargha-Khadem, 2001).

Speech and language assessment is appropriate when a young child displays a significant functional communication disorder, disability or delay (Boyse 2012). Communication disability can manifest along a range from children with major problems with functional communication to children whose speech and language capabilities are below the expected level for their age. A range of intervention strategies is available to help improve their speech and language.

With a better understanding of why a child is not talking, ways of encouraging speech development can be enhanced. These ways can be given at home and care centres through the following ways as opined by Owens (2012).

- Spending a lot of time communicating with a child at home from infancy talk, sing and encourage imitation and gestures.
- > Reading to a child as early as six months and letting the child point to recognized pictures in the book.
- Using every situation to reinforce a child's speech and language such as asking questions and acknowledging the child's responses.
- Adopting parent training programmes. Speech and language intervention can take the form of training parents to work with their own children to improve speech and also change the mother's patterns by a speech therapist for useful effect.
- ➤ Building relationships by becoming an empathic language partner. When a person cares about another, he or she usually would want to communicate with that person. An infant or toddler would want to communicate when it is pleasant to communicate. Warmth and love will achieve response.
- Being an interactive language partner. Interaction with the infant helps the child learn that communication is active to get needs meet.
- Using self-talk and parallel talk. The talk an adult uses to describe what they are doing while with infant for example or a caregiver who wants to change a baby's diaper would say "I am getting your diaper in a minute" "Now am lifting your feet, am putting the diaper on. All these tie language to an objective manipulation or action by making words come alive and bring meaning to the child.
- Talking often with the child with varied vocabulary
- ➤ Using joint attention strategy example, a mother may use sign language and present an object representation as she is conversing with the infant.
- ➤ Using the four E approach Encourage child communication by listening, expanding semantics and syntax of the child in conversation. Elaborate on complex and lengthened sounds, words and sentences. Expand on language imitation models.
- Using semantically responsive talk, The cooing sound of the baby which may seem boring to the adult, the infant delights in the eyes, emotional connection and the continuous development of infant's language are rewarding enough to the caring adult.
- Using questions and control carefully. There could be thoughtful open-ended questions that have more than one acceptable answer such as "what song do you want to sing next? The variation of vocabulary by adults and caregivers provides a positive affirmation in the conversation with the child and speech and language development is at top gear as a result.

### 5. Conclusion

Language can develop smoothly and continuously or in jumps and sports. There is a great variation in the onset of expressive language. Children generally understand far more than they are able to articulate themselves. The first few years of a child's life are key to the development of speech language and cognitive skills. It is therefore important to create activities and strategies that give them all the stimulation, positive role modeling and human contact that they need. Everyday activities can be a great way to practice speech, language and literacy skills. Children like games and

are motivated when it becomes competitive. Playful activities are crucial for enjoyable language learning. Infants enjoy and benefit from interaction with those who use conversation by maintaining mutual style of passing information for speech and language processing.

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