Specific Language Impairment in preschoolers

How can I help my child?

BOOKLET BY:
GENIEVE TEO (U1530834A)
Dear parents & caretakers

If you are reading this, you are probably worried about your child’s language learning progress. Before anything else, you need to recognize that every child is different and unique. Despite language learning being a natural process when kids are exposed to language, they may not all acquire it at the same time. Therefore, comparing your child to another is not equitable. Instead, finding out more about what your child is going through (which is what you’re doing now) and supporting him/her in this journey is much more crucial. Just so you know, you are doing a great job! I hope that you find this booklet useful and that it addresses the concerns that you may have.

Geneieve Teo
Student from Nanyang Technological University
What is Specific Language Impairment?

Language refers to a system of communication that people use to understand each other. Either spoken or written, containing the use of words in a structured way. We need language to communicate our thoughts and with people around us. A substantial amount of language development takes place even before a child is able to speak his first word.

Specific language impairment (SLI) is a developmental disorder defined by unexplained delayed language learning in children with normal global intellectual functioning, hearing abilities and exposure [1] [2]. It is also known as developmental language disorder and it is one of the most common childhood learning disabilities. An average of 7-8% of children in kindergarten is affected by this [3].

What causes SLI?
The cause is still unknown but recent studies showed that it has a strong genetic link. 50-70% of children with SLI have at least one member in the family with the disorder.
10 MONTHS
follow simple and short instructions

12-18 MONTHS
emergence of first words

18-24 MONTHS
speaking in 2-3 word phrases
Children with SLI are often late talkers and only start producing words at the age of two. When they start talking at the age of three, it may be harder to understand. There are a few ways to test if your child has SLI. One of it being, having interactions with a toy to analyse specific rules of grammar, particularly misusing verb tenses [3]. These tests can be used when your child is as young as 3 to 8 years of age. Early identification would be helpful when they start attending school as you can highlight it to the teachers. As your child grows older, there’s a high chance that they will struggle to learn new words and making conversation.

There are direct and indirect ways in which interventions are made for children with speech and/or language disorder.

Direct intervention focuses on treating the child one-on-one or within a group [9]. This depends on the child’s needs and facilities available. Group treatments are presumed to benefit children as they get the chance to interact with others and learn from each other.

Indirect intervention on the other hand, is often seen to be a more realistic approach which allow adults who are within the child’s language environment to facilitate communication [9]. These interventions are carried out in a range of settings such as nursery/school, home, private practices, specialist professionals or parents and teachers. What indirect interventions can you participate in? The next few pages will give you some tips for you to intervene.
**#2 TIPS & TRICKS**

**VERB:**

- "to stalk"
- "to move backwards"

Gesturing the manner of movement (verbs) helps children interpret new verbs [6].

**NOUN:**

- "the rail"
- "beisa"

Iconic gestures that highlights the shape of the animals (nouns) is shown to support noun learning [5].

---

**1 Iconic hand gestures**

Gestures are visible actions of body parts which makes up a vital role in conversations [4]. It facilitates your child’s comprehension of a spoken message.

The ability to derive meaning from iconic gesture develops when a child reaches the age of 3 and is acquired by the age of 3.5 to 4.0 [4]. When you speak to your child, pair it with iconic gestures that highlights the verb and noun.

Seeing iconic gestures helped preschool children to focus on a particular aspect of novel verbs and thus enhanced learning their meaning [7].

Iconic gestures, which is not just pointing gestures, it has more contributions besides making children more engaged and attentive during word learning [6] [8].

A few studies conducted by researchers showed that it strengthened effective word learning as children make use of information from observing iconic gestures for processing and encoding new vocabulary.
Parent-child interaction is highly important especially for younger children as such indirect intervention usually involves the child’s parents/caregivers. A communicative environment is thus created through positive parent-child interaction. Evidence from a study showed that the commitment of parents and the experience of practitioner’s training that makes the difference [9].

Use everyday opportunities to find simple ways to focus on your child’s speech and language

Talk about the surroundings and the environment when you are out with your child. For example, what are the people at the park doing? Bring their attention to the verbs that you use such as the names of various occupations in your surrounding (bus-driver, hawker, cobbler, construction worker etc.)

During bath time, instead of telling your child to be still or just bath in silence, you can talk to your child and model words for them. For example, introduce new vocabulary.

Verbs: splash, rinse, wash, scrub, dry, sink, float.

Nouns: soap, brush, toilet, bathtub, bubbles, wet, dry
Encourage Encouraging Encouragement

Research has shown that the more patients (children with SLI) are engaged in the intervention, the better their outcomes [10] evidence suggests that building patients’ skills and confidence is key to increasing engagement [11]. Therefore, instead of negative reinforcement, you can show your support and approval of your child by encouraging him/her through your words! It means a lot to your child as you continually encourage them.

Praise them for what they are doing right

Make big of even the smallest progress! Your support as a parent is paramount and has an impeccable influence on them throughout their developmental years.

Never condemn your child for the mistakes made or speech abilities, that is the last thing they need. In fact, it is something they don’t even need!

Majority of interventions involves the training of specific behaviours (speech sounds, vocabulary, sentence structures) accompanied by positive reinforcement. Most commonly this involves rewards of some form (stickers, tokens and, most often, praise).
Read to your child every day. Every time you read to your child, you are contributing to his/her brain development and strengthening your child’s speech and language skills [12]. However, this is not a one-way communication where your child sits and listens as you read. There are additional things that you can do to facilitate conversations and communication with your child through reading:

When selecting which books to read with your child, funny books with more illustrations and rhyming words are a good choice. It is more engaging and promotes interaction. Here are some suggested books you can read with your pre-schooler:

1. Does a Chimp Wear Clothes? — by Fred Ehrlich, M.D.
2. Mr. Brown Can Mool Can you? — by Dr. Seuss
3. Hippos Go Beserk! — by Sandra Boynton

You can play games with your child by listing words that rhyme with what they read (“ball”, “tall”)

Review the story after reading it with your child by asking ‘why’ questions. “why do you think Mr. Lobbies gave all his money away?”

Bring awareness to letter sounds using interactions. For example, pointing to a picture of animals in the book and asking “what sound does this animal make?” and as your child further develops, you can ask more complex questions. For example, pointing to a picture of a cat and ask “what sound does ‘cat’ start with?”
There is a variety of simple games that you can play with your child that indirectly works on their speech and language! It is a time for thinking and opportunities to interact/ask questions. It is important for you to be able to obtain quality conversations which allows your child ask questions as well. While input is important, it is crucial that your child has the output to practice as well.

**TOYS:** Toys are a great way of involving your child as it provides many situations to develop speech and language skills!

Turn-taking, joint focus, sharing, listening, attending, observing are all important aspects [20] that occurs during simple games such as building blocks or playing pretend. You can use new words with the toy that you are using.

**ROLE PLAY:** Games involving different characters will allow you to introduce lots of new related language and stretch your child’s creative play skills. It is an awesome way to expand your child’s imagination and introducing new vocabulary.

Doctor game: Let your child be a doctor and you can be the patient. You can set up the scene. Think of the verbs you might use in this game: take my temperature, feed me medicine, check my heartbeat, sit down, pay the doctor. If your child finds the game complicated, you could be the doctor first and model it for your child, then your child can take a turn and you add language to the situation.
S.O.S Help me!!!

WHAT CAN PROFESSIONALS DO TO HELP YOU?
DO YOU REALLY NEED THEM?

In the world we live in today, technology is advanced and every question you have, you can 'Google' within seconds. Is there really a need to hire a speech therapist when almost all your answers can be found in a few clicks? Here is how a speech therapist can help you and your child through this journey.

A speech language therapist will be able to identify and diagnose your child with the severity of communication disorders and those who are at risk for later problems. Screening when your young is younger could be more useful as most of the serious speech/language impairment that surfaces during the mid of childhood could have been identified when the child is aged five [9].

They can also work directly with your child, you, caregivers, teachers as well as other professionals to discuss how the child can be best supported in his daily environment based on the individual. This is important as it caters specifically to the contributing factors of your child’s language environment.

As SLI affects reading, it affects learning. Thus, if it is not treated early, it could possibly affect a child’s performance in school [3]. Since early signs of SLI can be observed when your child is three years old, you can use his/her preschool years to go for special programs which aims to enrich language development in preparation for kindergarten.
Q: Is it advised for my child with SLI to be bilingual or monolingual?

A: Your child can learn a second language, there will be no negative effect on your child.

We’ll first identify two groups of children. The first group of children have been exposed to two languages from birth, also known as a simultaneous bilingual, learning two languages before the age of three. The second group of children are have learned their first language and is introduced to a second language after the age of three. They are also known as sequential bilinguals.

To address the first group of children, simultaneous bilingual children with SLI, a comparison is made with monolingual children with SLI. The results show that there is no greater difficulties is found in the bilingual’s two languages when compared with the monolingual children [13]. Both simultaneous bilingual children and monolingual children with SLI displayed the same challenges but no extra difficulties in the bilingual group [14] [15].

The second group of children — sequential bilingual children with SLI. Most studies revealed that sequential bilinguals with SLI who learn a second language are able to catch up to their monolingual (children who only learn one language) peers with SLI after sufficient exposure to the second language [16]. These children follow a similar developmental path and achieve similar levels of language proficiency as monolingual children with SLI. There has not been any research that proved otherwise which certifies that sequential bilingual children with SLI can learn second languages.

With that being said, it is important to note that children whose languages are both highly supported in their community and school seem to be advantageous to the child and plays an important role in their proficiency level.
How about...

Q: Will the impairment disappear as the child ages?
A: In most cases, it continues to adulthood.

Different children grow and progress very differently because of the various environments and approach used in their language development. However, in a general overview based on a research conducted, children who were presented with preschool language disorders do constitute a high-risk group of children for later academic and language difficulties. [17]

The outcomes of children with SLI has a direct relationship with the severity of the language impairment. One in four children identified at the 5 will not demonstrate continued difficulty with intervention. Whereas SLI continues to be present through age 12 and to adulthood in the other three children [18]. Regardless of the cause of SLI, children with severe receptive language disorder are highly likely to have less desirable results and more long-term issues [19]. During young adulthood, the individuals with early history of language impairment are at risk of being behind controls in every area of their academic achievement.
Don't worry!

You are not alone! There are many other parents who started out clueless and lost. But they managed to help their children and successfully raised champion kids! We all have a choice to make and you can choose to be a parent who believes in the best of your child. With the guidance of professionals and encouragement from a community of parents like yourself, you will be able to raise your child with confidence.
Further readings:


And even more readings...


